PCT

08/682,277

21 4

WORLD INTELLECTUAL PROPERTY ORGANIZATION International Bureau



INTERNATIONAL APPLICATION PUBLISHED UNDER THE PATENT COOPERATION TREATY (PCT)

WO 98/02150 (51) International Patent Classification 6: (11) International Publication Number: A1 A61K 31/00, A01N 43/04, C07H 21/04 22 January 1998 (22.01.98) (43) International Publication Date:

PCT/US97/06103 (21) International Application Number:

4 April 1997 (04.04.97) (22) International Filing Date:

(30) Priority Data: US 17 July 1996 (17.07.96)

(71) Applicant: MEDTRONIC, INC. [US/US]; 7000 Central Avenue N.E., Monneapolis, MN 55432 (US).

(72) Inventors: STOKES, Kenneth, B.; 17581 Eidelweiss Street N.W., Anoka, MN 55304 (US). MORISSETTE, Josée; Apartment 306, 1101 Paul Parkway, Blaine, MN 55434 (US).

(74) Agents: PRESTON, Albert, W., Jr. et al.; Woodcock, Washburn, Kurtz, Mackiewicz & Norris LLP, 46th floor, One Liberty Place, Philadelphia, PA 19103 (US).

(81) Designated States: AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CU, CZ, DE, DK, EE, ES, FI, GB, GE, GH, HU, IL, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS. LT. LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, TJ, TM, TR, TT, UA, UG, UZ, VN, YU, ARIPO patent (GH, KE, LS, MW, SD. SZ, UG), Eurasian patent (AM, AZ, BY, KG, KZ, MD, RU, TJ, TM), European patent (AT, BE, CH, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE), OAPI patent (BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG).

Published

With international search report.

(54) Title: SYSTEM FOR GENETICALLY TREATING CARDIAC CONDUCTION DISTURBANCES

(57) Abstract

The present invention provides delivery systems for delivering conduction protein genetic material to cardiac cells in localized areas of the heart to improve the conductance therein. More specifically, there is provided a system for delivering connexin proteins or nucleic acid molecules encoding connexin proteins to a site in the heart which has been determined by mapping procedures to have a conduction disturbance. For cases where conduction is impaired, selected genetic material is delivered by Applicants' delivery system to cells around the disturbance area, in order to enhance overall conductivity patterns; in other cases, genetic material is selected to slow conduction in affected areas, so as to prevent, e.g., brady-tachy syndrome.

FOR THE PURPOSES OF INFORMATION ONLY

Codes used to identify States party to the PCT on the front pages of pamphlets publishing international applications under the PCT.

AL	Albania	ES	Spain	LS	Lesotho	SI	Slovenia
AM	Armenia	FI	Finland	LT	Lithuania	SK	Slovakia
AT	Austria	FR	Prance	LU	Luxembourg	SN	Senegal
ΑU	Australia	GA	Gabon	LV	Latvia	SZ	Swaziland
AZ	Azerbaijan	GB	United Kingdom	MC	Monaco	TD	Chad
BA	Bosnis and Herzegovina	GE	Georgia	MD	Republic of Moldova	TG	Togo
BB	Barbados	GH	Ghana	MG	Madagascar	TJ	Tajikistan
BE	Belgium	GN	Guinea	MK	The former Yugoslav	TM	Turkmenistan
BF	Burkina Faso	GR	Greece		Republic of Macedonia	TR	Turkey
BG	Bulgaria	HU	Hungary	ML	Mali	TT	Trinidad and Tobago
Bj	Benin	IE	Ireland	MN	Mongolia	UA	Ukraine
BR	Brazil	11.	Israel	MR	Mauritania	UG	Uganda
BY	Belarus	18	lceland	MW	Malawi	US	United States of America
CA	Canada	17	kaly	МX	Mexico	UZ	Uzbekistan
CF	Central African Republic	JP	Japan	NE	Niger	VN	Viet Nam
CG	Congo	KE	Kenya	NL	Netherlands	YU	Yugoslavia
CH	Switzerland	KG	Kyrgyzstan	NO	Norway	zw	Zimbabwe
a	Côte d'Ivoire	KP	Democratic People's	NZ	New Zealand		
CM	Cameroon		Republic of Korea	PŁ	Poland		
CN	China	KR	Republic of Korea	PT	Portugal		
CU	Cuba	KZ	Kazakstan	RO	Romania		
CZ	Czech Republic	ıc	Saint Lucia	RU	Russian Federation		
DE	Germany	u	Liechtenstein	SD	Sudan		
DK	Denmark	LX	Sri Lanka	SE	Sweden		
E.E.	Batonia	LR	Liberia	SG	Singapore		

PCT/US97/06103 WO 98/02150

SYSTEM FOR GENETICALLY TREATING CARDIAC CONDUCTION DISTURBANCES

FIELD OF THE INVENTION

The present invention relates to systems for 5 delivering conduction protein genetic material to cardiac cells in localized areas of the heart to improve the conductance therein.

BACKGROUND OF THE INVENTION

20

The conduction system of the human heart is 10 normally automatic, resulting in the contraction of the atria and ventricles by means of electrical impulses that originate in cardiac tissue. The cardiac cycle is separated into the contraction phase (systole) and relaxation phase (diastole). Although the rhythm of the cardiac cycle is 15 intrinsic, the rate of this rhythm is modified by autonomic nerves and hormones such as epinephrine. The autonomic nervous system is comprised of parasympathetic and sympathetic nerves which release neurotransmitters such as acetylcholine and norepinephrine, respectively.

The natural pacemaker of the human heart is located in the posterior wall of the right atrium in a small area, approximately 2 by 5 by 15 mm, referred to as the sinoatrial node (SA node). The SA node initiates the cardiac cycle of systole and diastole phases by generating 25 an electrical impulse that spreads over the right and left atria, causing them to contract almost simultaneously. This electrical impulse, referred to as the pacemaker potential,

WO 98/02150

- 2 -

PCT/US97/06103

is created by the depolarization of the myocardial cells of the SA node, which results from changes in membrane permeability to cations. When the cell membrane is depolarized to about -30 mV, an action potential is 5 produced. This impulse then passes to the atrioventricular node (AV node), which is located on the inferior portion of the interatrial septum. The impulse then continues through the atrioventricular bundle, referred to as the bundle of His, which is located at the top of the interventricular 10 septum. The bundle of His divides into right and left branches which lead to the right and left ventricles respectively. Continuous with both branches of the bundle of His are the Purkinje fibers, which terminate within the ventricular walls. Stimulation of these fibers causes the 15 ventricles to contract almost simultaneously and discharge blood into the pulmonary and systemic circulatory systems.

Abnormal patterns of electrical conduction in the heart can produce abnormalities of the cardiac cycle and seriously compromise the function of the heart, sometimes

20 being fatal. For example, patients having such cardiac conduction disturbances may suffer from sick sinus syndrome (SSS), "brady-tachy syndrome," bradycardia, tachycardia, and heart block. Artificial pacemakers are often used in patients which suffer from these cardiac conduction

25 disturbances.

In SSS, the conduction problem relates to, inter alia, intermittent reentry of the electrical impulse within the nodal tissue, sometimes resulting in rapid heart beats. A dual chamber pacemaker is often used to sense atrial activity and control the ventricle at the appropriate rate.

In some congenital diseases such as "brady-tachy syndrome," bradycardia, a slow rate of impulse, and tachycardia, a rapid rate of impulse, occur intermittently. The disease can be fatal where long pauses allow premature ventricular contractions (PVCs) to occur in multiples, initiating tachycardia. A pacemaker and/or cardioverter can be used to control episodes of tachycardia, and conventional

PCT/US97/06103 WO 98/02150

- 3 -

demand type pacemakers have long been effective in treating bradycardia.

Excessive delay or failure of impulse transmission in abnormally slow impulse conduction is known as heart 5 block. Heart block is often caused by scar tissue disrupting the conduction system. The cardiac impulse is believed to normally spread from the SA node along internodal pathways to the AV node and ventricles within 0.20 seconds. Heart block occurs in three progressively 10 more serious stages. In first-degree heart block, although all impulses are conducted through the AV junction, conduction time to the ventricles is abnormally prolonged. In second-degree heart block, some impulses are conducted to the ventricles, whereas some are not. In third-degree heart 15 block, no impulses from the natural pacemaker are conducted to the ventricles. This results in a slower ventricular contraction rate. The rate of contraction in this case is usually determined by the rate of the fastest depolarizing His-Purkinje cell distal from the block site. Typically, 20 heart rates in third-degree block are in the 20 to 60 bpm range, but can also be as low as zero in some cases.

Arrhythmias resulting from cardiac conduction disturbances can be treated with a variety of drugs that inhibit specific aspects of the cardiac action potentials 25 and inhibit the production or conduction of impulses along abnormal pathways. Drugs used to treat these arrhythmias block the fast Na' channels (quinidine, procainamide, lidocaine), block the slow Ca** channel (verapamil), or block ß-adrenergic receptors (propranolol).

The cardiac conduction system, or electrical activation of the heart, involves the transfer of current, in the form of chemical ion gradients, from one myocardial cell to another. Conductive proteins in cardiac cells facilitate this transfer of current. Individual cardiac 35 cells express a plurality of gap junction channel proteins, through which ions traverse. The intercellular channels of gap junctions are assembled from individual membrane-

30

- 4 -

spanning connexin proteins, several of which have been cloned and sequenced in mammals. These proteins facilitate the transfer of ions from cell to cell and are responsible for electronic coupling of cells. Saffitz, et al., J. Card. 5 Electrophys., 1995, 6, 498-510.

Connexin proteins comprise a family of related proteins and include, for example, Cx43 (Fishman, et al., J. Cell Biol., 1990, 111, 589-598), and Cx40 and Cx45 (Kanter, et al., J. Mol. Cell Cardiol., 1994, 26, 861-868). 10 appears to be the most abundant connexin in the heart, with expression in the ventricle and atrial myocardium, and distal bundle of His and Purkinje fibers, while being absent from the SA node, AV node, and proximal bundle of His. Gourdie, et al., J. Cell Sci., 1993, 105, 985-991, and 15 Davis, et al., J. Am. Coll. Cardiol., 1994, 24, 1124-1132. Cx40 is most abundantly expressed in the atrial myocardium, and in the distal bundle of His and Purkinje fibers, while present at reduced levels in the ventricular myocardium, and the nodes. Gourdie, et al., J. Cell Sci., 1993, 105, 985-20 991, and Davis, et al., J. Am. Coll. Cardiol., 1994, 24, 1124-1132. Cx45 is moderately expressed in the ventricle and atrial myocardium, and distal bundle of His and Purkinje fibers, while present at lower levels in the SA node, AV node, and proximal bundle of His. Gourdie, et al., J. Cell 25 Sci., 1993, 105, 985-991, and Davis, et al., J. Am. Coll. Cardiol., 1994, 24, 1124-1132. Cx43 and Cx40 connexins are relatively fast conductive proteins, whereas Cx45 is a relatively slow conductive protein.

Gene therapy has recently emerged as a powerful
approach to treating a variety of mammalian diseases.

Direct transfer of genetic material into myocardial tissue
in vivo has recently been demonstrated to be an effective
method of expressing a desired protein. For example, direct
myocardial transfection of plasmid DNA by direct injection
into the heart of rabbits and pigs (Gal, et al., Lab.
Invest., 1993, 68, 18-25), as well as of rats (Ascadi, et
al., The New Biol., 1991, 3, 71-81), has been shown to

- 5 -

result in expression of particular reporter gene products. In addition, direct in vivo gene transfer into myocardial cells has also been accomplished by directly injecting adenoviral vectors into the myocardium. French, et al., Circulation, 1994, 90, 2415-2424, and PCT Publication WO 94/11506.

It has long been desired to effectively treat conduction pathway abnormalities. To this end, conventional procedures including drug therapy, pacemaker technology, or 10 a combination thereof, have been employed. In contrast to these therapeutic procedures, Applicants' invention is directed to delivery systems for treating and/or correcting disturbances in the cardiac conduction pathway by delivering conduction protein genetic material into myocardial tissue. 15 In patients with cardiac conduction disturbances, it is desirable to locate the problematic area within the heart, and either treat the problematic cells to restore proper cardiac conduction or enhance the cardiac conduction of normal cells surrounding the problematic area. For example, 20 in a patient with heart block, a tract of normal, healthy cells surrounding the scar in the ventricle, which is causing the heart block, is identified and treated with Applicants' delivery system by expressing cardiac conduction proteins, such as, for example, gap junction proteins to 25 impart a faster or otherwise enhanced conduction system. this case, the block can be effectively bridged, or shunted, resulting in a QRS of a width intermediate between a normally conducted beat and a PVC.

SUMMARY OF THE INVENTION

of Applicants' claimed invention is to provide delivery systems for treating cardiac conduction disturbances. Upon identifying a problematic area within the heart, conduction protein genetic material is selected such that expression of a selected conduction protein corrects or improves the cardiac conduction of the cells in the problematic area.

- 6 -

Alternatively, expression of a selected conduction protein can improve the cardiac conduction of normal, healthy cells surrounding the problematic cells. Improvement of cardiac conduction can be manifested by a replacement, a speeding 5 up, or a slowing down of the existing conduction pathway. The conduction protein genetic material comprises recombinant nucleic acid molecules comprising a nucleic acid molecule encoding the conduction protein inserted into a delivery vehicle, such as, for example, plasmids or 10 adenoviral vectors, and the appropriate regulatory elements. Alternatively, the conduction protein genetic material comprises the conduction protein itself. Expression of the desired conduction protein from recombinant nucleic acid molecules is controlled by promoters, preferably cardiac 15 tissue-specific promoter-enhancers, operably linked to the nucleic acid molecule encoding the conduction protein. conduction protein is preferably a gap junction protein, such as, for example, the connexins Cx40, Cx43, and Cx45, which is used to correct or improve the cardiac conduction 20 of cells within the problematic area. For example, if the cardiac conduction pathway disturbance is a heart block or bradycardia, Cx43 or Cx40 is preferably used. the cardiac conduction pathway disturbance is tachycardia, Cx45 is preferably used. The cardiac conduction genetic 25 material is delivered to specific sites within the heart by perfusion or injection of a therapeutically effective amount, which is that amount which corrects or improves the cardiac conduction of the myocardial cells. therapeutically effective amount can be delivered to the 30 specific site in the heart in a single dose or multiple doses, as desired.

The present invention provides a delivery system for delivering a therapeutically effective amount of a predetermined conduction protein genetic material to an identified cardiac location, the genetic material being selected for altering the conductivity of cardiac cells to which it is delivered. The delivery system includes the

- 7 -

selected genetic material contained in a reservoir, and a catheter subsystem for delivering the genetic material from the reservoir to the identified cardiac location so as to contact a plurality of cells in the proximity of the selected cardiac location.

The delivery system may utilize an external reservoir for providing the genetic material, or alternately may utilize an implantable reservoir. In either embodiment, a controllable pump mechanism is provided for transferring 10 therapeutic doses of the genetic material from the reservoir, through a catheter, and to the selected cardiac location. The catheter subsystem may be of a type for direct introduction into the myocardium, as with a transthoracic procedure, or, more preferably, a endocardial 15 catheter having a distal tip portion adapted for positioning and injecting the genetic material into the myocardium from within a heart chamber. In a preferred embodiment, the catheter distal tip has a normally withdrawn helical needle, which is extendable when positioned in the vicinity of the 20 selected site so as to be screwed into the heart. needle is hollow and connects with the catheter lumen so as to receive the pumped genetic material; it has one or more ports located so as to effectively release the genetic material for transduction into the mapped area. In another 25 preferred embodiment of the invention, the delivery system is combined with the mapping catheter such that once the selected site is identified, the delivery system, which is within the mapping catheter, is engaged without removing the mapping catheter. The delivery system can be used for one 30 treatment and then removed, or can be implanted for subsequent treatments, in which latter case it is controllable by an external programmer type device.

BRIEF DESCRIPTION OF THE DRAWINGS

Figure 1 is a flow diagram presenting the primary steps involved in the practice of this invention, including mapping the patient's conductive system to determine the

- 8 -

location of the problem, choosing an appropriate genetic material, and expressing the genetic material in an appropriate dose into the determined location.

Figure 2 is a schematic representation of a

5 delivery system in accordance with this invention,
illustrating delivery of genetic material into a patient's
heart at the chosen location.

Figure 3 is a schematic drawing of the distal portion of a catheter, which can be extendable and retractable, used for injecting a solution carrying chosen genetic material into a patient's heart.

Figure 4 illustrates the distal end of a catheter, having a distal portion which encloses an osmotic pump.

Figure 5 illustrates a delivery system in which

15 the delivery means comprises a mapping catheter combined

with a delivery system for injecting a solution carrying

chosen genetic material into a patient's heart.

Figure 6A is a schematic representation of a delivery system in accordance with this invention, having a combined catheter and pacing lead, with a separate pump; Figure 6B is another embodiment of a combined pacing lead and delivery catheter having a reservoir located at the distal end of the catheter.

DESCRIPTION OF THE PREFERRED EMBODIMENTS

25 Applicants' invention provides delivery systems for treating cardiac conduction pathway disturbances. A problematic area exhibiting, for example, SSS, "brady-tachy syndrome," bradycardia, tachycardia, or heart block, within the heart is identified by routine and conventional 30 techniques known to the skilled artisan. Once the specific problem has been identified, conduction protein genetic material is selected such that expression of a selected conduction protein corrects or improves the cardiac conduction of the problematic cells or improves the cardiac conduction of normal cells surrounding the problematic cells. The conduction protein genetic material comprises

- 9 -

either the conduction protein itself or recombinant nucleic acid molecules comprising a nucleic acid molecule encoding the conduction protein inserted into a delivery vehicle, such as, for example, plasmid, cosmid, YAC vector, viral 5 vectors, and the like, and the appropriate regulatory elements. In preferred embodiments of the present invention, the nucleic acid molecule encoding the conduction protein is the full length coding sequence cDNA of a conduction protein, and is inserted into a plasmid or 10 adenoviral vector, such as, for example, pGEM3 or pBR322, and Ad5, respectively. The regulatory elements are capable of directing expression in mammalian cells, specifically human cells. The regulatory elements include a promoter and a polyadenylation signal. Expression of the desired 15 conduction protein is preferably controlled by cardiac tissue-specific promoter-enhancers, operably linked to the nucleic acid molecule encoding the conduction protein. conduction protein is preferably a gap junction protein, such as, for example, the connexins Cx40, Cx43, and Cx45, 20 which is used to correct or improve the cardiac conduction of cells within the problematic area. The specific gap junction protein chosen is dependent upon the nature of the identified problem. For example, where the conduction is slow or non-existent, such as in heart block or bradycardia, 25 introduction of Cx40 or Cx43 would enhance conduction. contrast, introduction of the slower conducting Cx45 into the AV node and His tissues would result in the prevention of brady-tachy syndrome and tachycardia. The conduction protein genetic material is preferably delivered in a 30 pharmaceutical composition comprising, for example, the conduction protein genetic material in a volume of phosphate-buffered saline with 5% sucrose. The cardiac conduction genetic material is delivered to specific sites within the heart by perfusion or injection of a 35 therapeutically effective amount, which is that amount which corrects or improves the cardiac conduction of the myocardial cells. The therapeutically effective amount can

- 10 -

be delivered to the specific site in the heart in single or multiple doses, as desired, using the delivery systems of the invention.

The present invention comprises a delivery system 5 for delivering a therapeutically effective amount of conduction protein genetic material to a mapped cardiac location in such a way as to enhance the effective conduction of the myocardial cells around the area of disturbance. In a first embodiment, the delivery system 10 basically comprises a reservoir subsystem for holding the genetic material, and a catheter subsystem in communication with the reservoir subsystem for placement of the genetic material in and around the identified cardiac location. seen in the following discussion of several preferred 15 embodiments, the reservoir subsystem and catheter subsystem may be separate, or they may be combined. Preferably the reservoir contains up to 25 ml of a genetic material for delivery to the myocardium. In some applications, only a bolus of about 0.1-10 ml, or more preferably 1-5 ml, is 20 delivered to the targeted areas. In other applications, such as where conduction protein is being delivered in repeated doses, 25 ml or more may be used. Also, the genetic material may be diluted in a saline solution, such as, for example, phosphate-buffered saline (PBS), the 25 reservoir holding the diluted solution for controlled delivery. Additionally, it is to be understood that the reservoir and associated control apparatus may be either implantable or external to the body, depending upon the circumstances, e.g., whether metered doses are to be 30 administered to the patient over a period of time, or whether the delivery of the genetic material is essentially a one time treatment.

Referring now to Fig. 1, the primary steps involved in the practice of this invention are shown in the flow diagram. As illustrated in 30, the first step is to determine the nature of the cardiac conduction disturbance, which can manifest itself in ineffective or harmful

conductive properties. This step can constitute diagnosis of SSS, "brady-tachy syndrome," bradycardia, tachycardia, heart block, etc. The next step, illustrated in 32, is mapping the patient's heart to determine the location, size 5 and extent of the disturbance of problematic area. Intracardiac electrocardiographic techniques, or electrophysiology (EP) studies, permit a detailed analysis of the mechanisms of cardiac impulse formation and conduction. The testing and mapping protocol utilized and 10 the sites selected for recording depend upon the symptoms manifested in the individual. One skilled in the art is readily familiar with cardiac mapping techniques, such as, for example, those described in U.S. Patent 4,699,147, U.S. Patent 5,297,549, and U.S. Patent 5,397,339, all of which 15 are incorporated by reference. The mapping techniques known to those skilled in the art will readily identify those cardiac locations encompassing cardiac cells with abnormal conduction properties. As shown in 33, the next step is to select the appropriate conduction protein genetic material. 20 This selection, which yields the "preselected genetic material," is dependent upon the nature of the cardiac conduction disturbance, as discussed below. The conduction protein genetic material is next prepared, as illustrated in 34, by either inserting the nucleic acid molecules encoding 25 the appropriate conduction protein into a delivery vehicle with the appropriate regulatory elements, in the case of a recombinant nucleic acid molecule, or expressing the conduction protein from an expression vector, in the case of the conduction protein itself. As shown in 35, the next 30 step is to prepare and load the delivery system with a therapeutically effective amount of the conduction protein genetic material. As illustrated in 37, the next step comprises administering the therapeutically effective amount to the patient by contacting the appropriate location in the 35 heart, as determined earlier, using the delivery system described herein. An alternative method of administering the therapeutically effective amount of the conduction

- 12 -

protein genetic material is to directly inject the heart of the patient. The final step, shown in 38, is to evaluate the response of the patient to the treatment.

Referring now to Fig. 2, there is shown an 5 illustrative embodiment of a delivery system useful for certain applications of this invention, e.g., where larger amounts of genetic material alone or in solution are employed. A catheter 36, preferably a transvenous catheter, includes an elongated catheter body 40, suitably an 10 insulative outer sheath which may be made of polyurethane, Teflon, silicone, or any other acceptable biocompatible plastic. The catheter has a standard lumen (illustrated in Fig. 3) extending therethrough for the length thereof, which communicates through to a hollow helical needle element 44, 15 which is adapted for screwing into the patient's myocardium. The outer distal end of helical element 44 is open. permitting genetic material in fluid form to be dispensed out of the end, as is discussed in more detail below in connection with Fig. 3. At the proximal end of the 20 catheter, a fitting 46 is located, to which a Luer lock 48 is coupled. Luer lock 48 is coupled to the proximal end of elongated catheter body 40 and receives the lumen. mount 50 is mounted to Luer lock 48, allowing rotation of the catheter relative to Luer lock 52. Luer lock 52 in turn 25 is coupled through control element 54 to a tube 58 which communicates with reservoir 55, suitably through flow control 57 and filter 56. Reservoir 55 holds a supply of the selected genetic material. Control elements 57 and 54 are used for adjustment of the pressure and flow rate, and 30 may be mechanically or electronically controlled. Thus, unit 54 or 57 may be used to control either rate of delivery, or dosage size, or both. Control unit 54 may be programmed to automatically release predetermined doses on a timed basis. Further, for an implanted system, control unit 35 54 may be activated from an external programmer as illustrated at 51. Reference is made to international

application published under the PCT, International

- 13 -

Publication No. WO 95/05781, incorporated herein by reference, for a more detailed description of such a reservoir and catheter combination. It is to be understood that such a system is useful for this invention only for applications where larger fluid amounts are to be expressed, e.g., where a diluted saline solution is used to wash or perfuse a selected area.

Referring now to Fig. 3, there is shown in expanded detail a schematic of the distal end of the 10 catheter of Fig. 2, illustrating the interconnection of the helical element 44 with the interior of the catheter. As illustrated, the helical needle 44 is provided with an internal lumen 59 which is in communication with the internal lumen 63L of the lead formed by tube 63. In this 15 embodiment, helical element 44 may also be a pacing electrode, in which case it is formed of conductive material and welded, crimped, swaged, or connected by other means so as not to prevent fluid flow, to tip element 61. element 61 in turn is electrically connected to a conductor 20 coil or coils 64, 65, which extend the length of the lead and are connected to a pacemaker. An outer membrane 60 forms the outer wall of elongated catheter body 40, shown in Fig. 2. Further referring to Fig. 3, element 44 has an outlet 75 where the genetic material may be expressed, and 25 holes or ports 76, 77, and 78 may also be utilized for providing exits for the genetic material which is supplied through lumen 59 under a pressure of up to about one atmosphere from reservoir 55 and the control elements.

In practice, a catheter 36 of the form illustrated in Figs. 2 and 3 is advanced to the desired site for treatment, which site or location has been previously identified by means of cardiac mapping, as discussed above. The catheter may be guided to the indicated location by being passed down a steerable or guidable catheter having an accommodating lumen, for example as disclosed in U.S. Patent No. 5,030,204; or by means of a fixed configuration guide catheter such as illustrated in U.S. Patent No. 5,104,393.

WO 98/02150

Alternately, the catheter may be advanced to the desired location within the heart by means of a deflectable stylet, as disclosed in PCT Patent Application W0 93/04724, published March 18, 1993, or by a deflectable guide wire as disclosed in U.S. Patent No. 5,060,660. In yet another embodiment, the helical element 44 may be ordinarily retracted within a sheath at the time of guiding the catheter into the patient's heart, and extended for screwing into the heart by use of a stylet. Such extensible helical arrangements are commercially available and well known in the pacing art.

- 14 -

PCT/US97/06103

It is to be understood that other forms of the reservoir subsystems and catheter subsystems are within the scope of this invention. Reservoir embodiments include, for example, drug dispensing irrigatable electrodes, such as those described in U.S. Patent 4,360,031; electrically controllable, non-occluding, body implanting drug delivery system, such as those described in U.S. Patent No. 5,041,107; implantable drug infusion reservoir such as those described in U.S. Patent No. 5,176,641; medication delivery devices such as those described in U.S. Patent 5,443,450; and infusion pumps, such as SYNCHROMED® made by Medtronic, Inc.; and osmotic pumps such as those made by Alza.

Referring now to Fig. 4, there is shown, by way of illustration, another embodiment of a delivery system having a combined catheter and reservoir, useful for applications involving delivery of a relatively small bolus of genetic material, e.g., 1-5 ml. Fig. 4 illustrates the distal end of a catheter, having a distal portion 70 which encloses an osmotic pump. See U.S. Patent 4,711,251, assigned to Medtronic, Inc., incorporated herein by reference. The pump includes an inner chamber 68 and an outer chamber 66, which chambers are separated by an impermeable membrane 67. A semi-permeable outer membrane 72 forms the outer wall of chamber 66. The tubular portion 74 of the helical member connects to lumen 74L within inner chamber 68. A conductor 80, which runs the length of the catheter, extends into the

- 15 -

inner chamber 68 and connects with extension 74E as shown at 74C to provide electrical contact through to element 44, in an application which the element 44 is used as a pacing electrode. A seal 79 is provided at the point where the conductor passes through outer membrane 72 and inner membrane 67. An insulating cover 86 encompasses the conductor 80 from the point of contact with seal 79. An end cap 73, which may be integral with outer membrane 72 closes the chamber. Alternately, end cap 73 may be constructed to elute a predetermined medication, such as, for example, steroids. Steroids, such as dexamethasone sodium phosphate, beclamethasone, and the like, are used to control inflammatory processes.

In this arrangement, prior to inserting the

catheter distal end into the patient's heart, the inner chamber 68 is charged with the genetic material which is to be dispensed into the myocardium. This may be done, for example, by simply inserting a micro needle through end cap 73, and inserting the desired bolus of genetic material into chamber 68. After the chamber 68 is filled and the catheter is implanted, body fluids will enter chamber 66 through membrane 72 to impart a pressure on the inner chamber 68 via the impermeable membrane 67. This results in a dispensing of the genetic material stored within chamber 68 through the lumen 74L of extension 74E and the helical element 44. Although the preferred needle or element 44 is helical, additional configurations of needles or elements can also be used as known to those skilled in the art.

30 illustrated another embodiment of a catheter tip useful for delivering a small bolus of the selected genetic material. In this embodiment, the bolus of material is stored within the hollow interior of helical element 44, i.e., the interior is the reservoir. The interior reservoir is maintained sealed by use of a soluble material which is normally solid, but which dissolves when subjected to body fluids for a period of time. An example of such material is

WO 98/02150

- 16 -

PCT/US97/06103

mannitol, which can be used when the delivery system is not preloaded with the conduction protein genetic material. Plugs or globules 81-85 of mannitol are illustrated (by dashed lines) in place to block the two ends of element 44, 5 as well as the ports 76, 77, 78. In instances where the conduction protein genetic material is preloaded into the delivery system, a shape memory metal can be used in place of the mannitol. Such metals are well known to the skilled artisan. Either of these features can be combined with an 10 osmotic pump, as described in connection with Fig. 3, where the outer chamber is filled with a saline solution which forces the genetic material out of the ports of element 44. Alternatively, the outer chamber can be filled with the genetic material, which is then forced out of the ports of 15 element 44. Another alternate embodiment, not shown, is to use a stylet which inserted through to the distal end of the catheter, to push a piston which aids in expressing the genetic material into the myocardial cells.

Although a transvenous form of delivery system is preferred, it is to be understood that the invention can employ other methods and devices. For example, a small bolus of selected genetic material can be loaded into a micro-syringe, e.g., a 100 μ l Hamilton syringe, and applied directly from the outside of the heart.

Referring now to Fig. 5, there is shown, by way of illustration, another embodiment of a delivery system having a combined mapping catheter and delivery means. The delivery system of this embodiment comprises a catheter 90 with a distal end 91 having an opening at the distal end.

The catheter 90 further comprises mapping electrode means 92 at the distal end 91. The mapping electrode means carries out the mapping of the patient's heart. Conductor means 93 electrically connects the mapping electrode means 92 to the proximal end 94 of the catheter 90. The delivery system further comprises a delivery means within the catheter. The

embodiment of the delivery means illustrated in Fig. 5 is the delivery means shown in Fig. 3. However, any of the

delivery means described herein can be used in combination with the mapping catheter shown in Fig. 5. The catheter 90 is inserted into the patient's heart and the site located by routine mapping procedures. Once a site is identified in the heart, the mapping catheter 90 remains in place and the delivery means is then extended through the distal end 91 of the catheter 90, and the heart tissue or cells is contacted with the conduction protein genetic material. In another embodiment of the invention, the catheter 90 is a peelable introducer sheath, with two conductor means 93 electrically connecting the introducer sheath, which serves to map the heart, to electrode means 92. Once the cardiac site is mapped, the delivery means is contacted with the heart tissue, and the introducer is removed and peeled away.

Referring now to Fig. 6A, there is shown, by way 15 of illustration, another embodiment of an implantable delivery system comprising a combined pacing lead and delivery catheter, hereinafter referred to simply as a catheter. In this embodiment, the catheter 90 is combined 20 with a pacemaker or pulse generator (not shown) and a source of genetic material such as illustrated by pump 100 which is suitably implanted near the pacemaker. The proximal end 101 of the catheter is connected to the pacemaker in the standard fashion. The genetic material is delivered through 25 connecting tube 102 to a proximal section 88 of the catheter, communicating with lengthwise catheter lumen illustrated at 89. Alternately, the pacemaker head may contain a reservoir and micropump, for providing delivery of the genetic material directly to the lumen 89. The main 30 length of the catheter has an outside sheath of biocompatible insulating material 96, and at least one conductor coil 95 which communicates electrically from the pacemaker to electrode 97 at the distal tip of the catheter. The catheter further comprises an axially positioned 35 polymeric cannula 103, having lumen 87, through at least a portion of the catheter length and positioned within coil

95, which provides an inner surface for the catheter lumen.

WO 98/02150

The cannula terminates at the distal end of the catheter, just proximal to the tip portion of electrode 97, which is illustrated as having an outer porous surface. Electrode 97 has a central opening, shown covered with the porous electrode material, through which genetic material can pass when the catheter is positioned in the patient. As shown, conductor coil 95 is electrically connected to electrode 97, and connects pace pulses and sensed cardiac signals between the pacemaker and the electrode. Of course, for a bipolar embodiment, the lead/catheter 90 carries a second electrode (not shown), suitably a ring electrode just proximal to electrode 97. Also, as illustrated, a fixation mechanism such as tines 98 are employed for fixing or anchoring the distal tip to the heart wall of the patient.

15 In one embodiment, pump 100 is suitably an osmotic minipump, which pumps fluid contained within through tube 102, into catheter portion 88 and through lumens 89, 87 to the tip electrode 97. As mentioned previously, the reservoir and pump may alternately be mounted in the 20 pacemaker device itself. In either instance, the genetic material is delivered under very minimal pressure from the reservoir through the lumen of the catheter to the electrode, where it is passed through the electrode central channel to contact myocardial cells. In yet another 25 embodiment, the lumen portion 87 provided by the cannula is utilized as the reservoir. In this embodiment, delivery may either be passive, or with the aid of a micropump (not shown). The genetic material can be preloaded into the cannula, or it can be inserted by a needle just before the 30 catheter is introduced and positioned with the patient.

In another embodiment, as illustrated in Figure 6B, a chamber 99 is provided just proximal from eluting electrode 97, and serves as the reservoir of the genetic material. Insulating material 96 is formed from a self-sealing material such that it may be pierced with a needle, or the like, and reseal itself, thus allowing introduction of the genetic material into the chamber prior to

- 19 -

implantation. Alternately, insulating material 96 can contain a port (not shown) through which the needle inserts the genetic material. In this embodiment, delivery of the material is without a pump, i.e., passive, the material draining slowly through the microporous portion of electrode 97.

As used herein, the phrase "cardiac conduction disturbance" refers to disturbances or disruptions of the normal cardiac conduction system in a mammal. Such disturbances may be the result of congenital phenomena or trauma, and can manifest in conditions such as, for example, sick sinus syndrome, "brady-tachy syndrome," heart block, bradycardia, tachycardia, and other arrhythmatic conditions. Manifestations of such cardiac conduction disturbances have been traditionally treated by drugs, artificial conduction systems such as pacemakers, ablation therapy, or a combination thereof.

As used herein, the phrase "conduction protein genetic material" refers to recombinant nucleic acid

20 molecules encoding the conduction proteins or, alternatively, the conduction proteins themselves, which are used in the methods and delivery systems of the invention. For chronic treatment, or long term treatment, the conduction protein genetic material will be in the form of recombinant nucleic acid molecules encoding the conduction protein. In contrast, for acute treatment, or short term treatment, the conduction protein genetic material will be in the form of the conduction proteins themselves. Once the conduction protein genetic material has been selected, it is referred to as "predetermined genetic material."

A "recombinant nucleic acid molecule", as used herein, is comprised of an isolated conduction protein-encoding nucleotide sequence inserted into a delivery vehicle. Regulatory elements, such as the promoter and polyadenylation signal, are operably linked to the nucleotide sequence encoding the conduction protein, whereby

- 20 -

the protein is capable of being produced when the recombinant nucleic acid molecule is introduced into a cell.

The nucleic acid molecules encoding the conduction proteins are prepared synthetically or, preferably, from isolated nucleic acid molecules, as described below. A nucleic acid is "isolated" when purified away from other cellular constituents, such as, for example, other cellular nucleic acids or proteins, by standard techniques known to those of ordinary skill in the art. The coding region of the nucleic acid molecule encoding the conduction protein can encode a full length gene product or a subfragment thereof, or a novel mutated or fusion sequence. The protein coding sequence can be a sequence endogenous to the target cell, or exogenous to the target cell. The promoter, with which the coding sequence is operably associated, may or may not be one that normally is associated with the coding sequence.

The nucleic acid molecule encoding the conduction protein is inserted into an appropriate delivery vehicle, 20 such as, for example, an expression plasmid, cosmid, YAC vector, and the like. Almost any delivery vehicle can be used for introducing nucleic acids into the cardiovascular system, including, for example, recombinant vectors, such as one based on adenovirus serotype 5, Ad5, as set forth in 25 French, et al., Circulation, 1994, 90, 2414-2424, which is incorporated herein by reference. An additional protocol for adenovirus-mediated gene transfer to cardiac cells is set forth in WO 94/11506 and in Barr, et al., Gene Ther., 1994, 1, 51-58, both of which are incorporated herein by 30 reference. Other recombinant vectors include, for example, plasmid DNA vectors, such as one derived from pGEM3 or pBR322, as set forth in Acsadi, et al., The New Biol., 1991, 3, 71-81, and Gal, et al., Lab. Invest., 1993, 68, 18-25, both of which are incorporated herein by reference, cDNA-35 containing liposomes, artificial viruses, nanoparticles, and the like. It is also contemplated that conduction proteins be injected directly into the myocardium.

- 21 -

The regulatory elements of the recombinant nucleic acid molecules of the invention are capable of directing expression in mammalian cells, specifically human cells. The regulatory elements include a promoter and a polyadenylation signal. In addition, other elements, such as a Kozak region, may also be included in the recombinant nucleic acid molecule. Examples of polyadenylation signals useful to practice the present invention include, but are not limited to, SV40 polyadenylation signals and LTR polyadenylation signals. In particular, the SV40 polyadenylation signal which is in pCEP4 plasmid (Invitrogen, San Diego, CA), referred to as the SV40 polyadenylation signal, can be used.

The promoters useful in constructing the 15 recombinant nucleic acid molecules of the invention may be constitutive or inducible. A constitutive promoter is expressed under all conditions of cell growth. Exemplary constitutive promoters include the promoters for the following genes: hypoxanthine phosphoribosyl transferase 20 (HPRT), adenosine deaminase, pyruvate kinase, β -actin, human myosin, human hemoglobin, human muscle creatine, and others. In addition, many viral promoters function constitutively in eukaryotic cells, and include, but are not limited to, the early and late promoters of SV40, the Mouse Mammary Tumor 25 Virus (MMTV) promoter, the long terminal repeats (LTRs) of Maloney leukemia virus, Human Immunodeficiency Virus (HIV), Cytomegalovirus (CMV) immediate early promoter, Epstein Barr Virus (EBV), Rous Sarcoma Virus (RSV), and other retroviruses, and the thymidine kinase promoter of herpes 30 simplex virus. Other promoters are known to those of ordinary skill in the art.

Inducible promoters are expressed in the presence of an inducing agent. For example, the metallothionein promoter is induced to promote (increase) transcription in the presence of certain metal ions. Other inducible promoters are known to those of ordinary skill in the art.

Promoters and polyadenylation signals used must be functional within the cells of the mammal. In order to maximize protein production, regulatory sequences may be selected which are well suited for gene expression in the cardiac cells into which the recombinant nucleic acid molecule is administered. For example, the promoter is preferably a cardiac tissue-specific promoter-enhancer, such as, for example, cardiac isoform troponin C (cTNC) promoter. Parmacek, et al., J. Biol. Chem., 1990, 265, 15970-15976, and Parmacek, et al., Mol. Cell Biol., 1992, 12, 1967-1976. In addition, codons may be selected which are most efficiently transcribed in the cell. One having ordinary skill in the art can produce recombinant nucleic acid molecules which are functional in the cardiac cells.

Genetic material can be introduced into a cell or 15 "contacted" by a cell by, for example, transfection or transduction procedures. Transfection refers to the acquisition by a cell of new genetic material by incorporation of added nucleic acid molecules. Transfection 20 can occur by physical or chemical methods. transfection techniques are known to those of ordinary skill in the art including: calcium phosphate DNA coprecipitation; DEAE-dextran DNA transfection; electroporation; naked plasmid adsorption, and cationic 25 liposome-mediated transfection. Transduction refers to the process of transferring nucleic acid into a cell using a DNA or RNA virus. Suitable viral vectors for use as transducing agents include, but are not limited to, retroviral vectors, adeno associated viral vectors, vaccinia viruses, and 30 Semliki Forest virus vectors.

Treatment of cells, or contacting cells, with recombinant nucleic acid molecules can take place in vivo or ex vivo. For ex vivo treatment, cells are isolated from an animal (preferably a human), transformed (i.e., transduced or transfected in vitro) with a delivery vehicle containing a nucleic acid molecule encoding a conduction protein, and then administered to a recipient. Procedures for removing

- 23 -

cells from mammals are well known to those of ordinary skill in the art. In addition to cells, tissue or the whole or parts of organs may be removed, treated ex vivo and then returned to the patient. Thus, cells, tissue or organs may be cultured, bathed, perfused and the like under conditions for introducing the recombinant nucleic acid molecules of the invention into the desired cells.

For in vivo treatment, cells of an animal, preferably a mammal and most preferably a human, are 10 transformed in vivo with a recombinant nucleic acid molecule of the invention. The in vivo treatment may involve systemic intravenous treatment with a recombinant nucleic acid molecule, local internal treatment with a recombinant nucleic acid molecule, such as by localized perfusion or 15 topical treatment, and the like. When performing in vivo administration of the recombinant nucleic acid molecule, the preferred delivery vehicles are based on noncytopathic eukaryotic viruses in which nonessential or complementable genes have been replaced with the nucleic acid sequence of 20 interest. Such noncytopathic viruses include retroviruses, the life cycle of which involves reverse transcription of genomic viral RNA into DNA with subsequent proviral integration into host cellular DNA. Retroviruses have recently been approved for human gene therapy trials. Most 25 useful are those retroviruses that are replication-deficient (i.e., capable of directing synthesis of the desired proteins, but incapable of manufacturing an infectious particle). Such genetically altered retroviral expression vectors have general utility for high-efficiency 30 transduction of genes in vivo. Standard protocols for producing replication-deficient retroviruses (including the steps of incorporation of exogenous genetic material into a plasmid, transfection of a packaging cell line with plasmid, production of recombinant retroviruses by the packaging cell 35 line, collection of viral particles from tissue culture media, and infection of the target cells with viral particles) are provided in Kriegler, M. "Gene Transfer and

WO 98/02150

- 24 -

PCT/US97/06103

Expression, a Laboratory Manual", W.H. Freeman Co., New York (1990) and Murry, E.J. e.d. "Methods in Molecular Biology", Vol. 7, Humana Press, Inc., Cliffton, New Jersey (1991).

A preferred virus for contacting cells in certain

5 applications, such as in in vivo applications, is the adenoassociated virus, a double-stranded DNA virus. The adenoassociated virus can be engineered to be replication
deficient and is capable of infecting a wide range of cell
types and species. It further has advantages such as heat

10 and lipid solvent stability, high transduction frequencies
in cells of diverse lineages, including hemopoietic cells,
and lack of superinfection inhibition thus allowing multiple
series of transductions. Recent reports indicate that the
adeno-associated virus can also function in an

15 extrachromosomal fashion.

In preferred embodiments of the present invention, the recombinant nucleic acid molecules comprising nucleic acid molecules encoding the conduction proteins, or, in the alternative, the conduction proteins, are delivered to the cardiac cells of the identified cardiac location, as determined by mapping procedures set forth above, using the delivery systems set forth above. Alternatively, the conduction protein genetic material is delivered to the cardiac cells of the identified cardiac location by direct injection.

In preferred embodiments of the present invention, the nucleic acid molecules encoding the conduction proteins comprise the full length coding sequence cDNA of a conduction protein. Preferably, the conduction proteins are the gap junction proteins; more preferably, they are the connexin proteins. Such nucleic acid molecules are described in the Fishman, et al., J. Cell. Biol., 1990, 111, 589-598, and Kanter, et al., J. Mol. Cell Cardiol., 1994, 26, 861-868 references, both of which are incorporated herein by reference, which contain the full length coding sequence cDNA of the connexin gap junction proteins Cx43, and Cx40 and Cx45, respectively.

- 25 -

Introduction of the gap junction-encoding nucleic acid molecules or the gap junction proteins to normal cardiac cells surrounding a scar causing heart block will result in normal or enhanced conduction. Alternatively, it 5 is proposed that introduction of the gap junction-encoding nucleic acid molecules or the gap junction proteins to abnormal cardiac cells, those cells exhibiting cardiac conduction disturbances, will result in normal or enhanced conduction properties. Determining the appropriate 10 conduction protein genetic material, i.e., determining which connexin protein is appropriate, is dependent upon the particular cardiac conduction disturbance diagnosed. example, if the cardiac conduction pathway disturbance is a heart block or bradycardia, in which conductance is slowed 15 or non-existent, Cx43 or Cx40, the faster connexins, is preferably used. However, if the cardiac conduction pathway disturbance is tachycardia, in which conductance is too rapid, Cx45 is preferably used.

Nucleic acid molecules comprising nucleotide 20 sequences encoding the connexin proteins Cx40, Cx43, and Cx45 are isolated and purified according to the methods set forth in Fishman, et al., J. Cell. Biol., 1990, 111, 589-598, and Kanter, et al., J. Mol. Cell Cardiol., 1994, 26, The nucleic acid and protein sequences of Cx40 are 25 set forth in SEQ ID NO:1 and SEQ ID NO:2, respectively. nucleic acid and protein sequences of Cx43 are set forth in SEQ ID NO:3 and SEQ ID NO:4, respectively. The nucleic acid and protein sequences of Cx45 are set forth in SEQ ID NO:5 and SEQ ID NO:6, respectively. It is contemplated that 30 nucleic acid molecules comprising nucleotide sequences that are preferably at least 70% homologous, more preferably at least 80% homologous, and most preferably at least 90% homologous to the connexin nucleotide sequences described in SEQ ID NOs 1, 3 and 5, can also be used.

It is understood that minor modifications of nucleotide sequence or the primary amino acid sequence may result in proteins which have substantially equivalent or

35

- 26 -

enhanced activity as compared to the conduction proteins exemplified herein. These modifications may be deliberate, as through site-directed mutagenesis, or may be accidental such as through mutations in hosts which produce the 5 conduction proteins. A "mutation" in a protein alters its primary structure (relative to the commonly occurring or specifically described protein) due to changes in the nucleotide sequence of the DNA which encodes it. mutations specifically include allelic variants. Mutational 10 changes in the primary structure of a protein can result from deletions, additions, or substitutions. A "deletion" is defined as a polypeptide in which one or more internal amino acid residues are absent as compared to the native sequence. An "addition" is defined as a polypeptide which 15 has one or more additional internal amino acid residues as compared to the wild type protein. A "substitution" results from the replacement of one or more amino acid residues by other residues. A protein "fragment" is a polypeptide consisting of a primary amino acid sequence which is 20 identical to a portion of the primary sequence of the protein to which the polypeptide is related.

Preferred "substitutions" are those which are conservative, i.e., wherein a residue is replaced by another of the same general type. As is well understood, naturally-occurring amino acids can be subclassified as acidic, basic, neutral and polar, or neutral and nonpolar and/or aromatic. It is generally preferred that encoded peptides differing from the native form contain substituted codons for amino acids which are from the same group as that of the amino acids which are interchangeable; the acidic amino acids Asp and Glu are interchangeable; the neutral polar amino acids Ser, Thr, Cys, Gln, and Asn are interchangeable; the nonpolar aliphatic acids Gly, Ala, Val, Ile, and Leu are conservative with respect to each other (but because of size, Gly and Ala are more closely related and Val, Ile and

Leu are more closely related), and the aromatic amino acids Phe, Trp, and Tyr are interchangeable.

While Pro is a nonpolar neutral amino acid, it represents difficulties because of its effects on conformation, and substitutions by or for Pro are not preferred, except when the same or similar conformational results can be obtained. Polar amino acids which represent conservative changes include Ser, Thr, Gln, Asn; and to a lesser extent, Met. In addition, although classified in different categories, Ala, Gly, and Ser seem to be interchangeable, and Cys additionally fits into this group, or may be classified with the polar neutral amino acids. Some substitutions by codons for amino acids from different classes may also be useful.

Once the nucleic acid molecules encoding the 15 connexin proteins are isolated and purified according to the methods described above, recombinant nucleic acid molecules are prepared in which the desired connexin nucleic acid molecule is incorporated into a delivery vehicle by methods 20 known to those skilled in the art, as taught in, for example, Sambrook et al., Molecular Cloning: A Laboratory Manual, Second Ed. Cold Spring Harbor Press (1989). Preferred delivery vehicles include, for example, plasmids (Acsadi, et al., The New Biol., 1991, 3, 71-81, and Gal, et 25 al., Lab. Invest., 1993, 68, 18-25, both of which are incorporated herein by reference) and adenovirus (WO 94/11506 and in Barr, et al., Gene Ther., 1994, 1, 51-58, both of which are incorporated herein by reference). nucleic acid molecules encoding connexin proteins, or 30 connexin proteins produced therefrom, are delivered to the cardiac cells of the identified cardiac location by the delivery systems of the present invention. Thus, such delivery systems of the present invention are used to contact the cardiac cells of the identified cardiac 35 location, which comprises cardiac cells having cardiac conduction disturbances, with recombinant nucleic acid molecules encoding a connexin protein, or connexin proteins. Where the conduction protein genetic material is in the form of conduction proteins, such proteins can be prepared in large quantities by using various standard expression systems known to those skilled in the art.

5 Sambrook et al., Molecular Cloning: A Laboratory Manual, Second Ed. Cold Spring Harbor Press (1989), pp. 16.1-16.55, incorporated herein by reference.

The recombinant nucleic acid molecules or connexin proteins are preferably delivered in a pharmaceutical 10 composition. Such pharmaceutical compositions can include, for example, the recombinant nucleic acid molecule or protein in a volume of phosphate-buffered saline with 5% sucrose. In other embodiments of the invention, the recombinant nucleic acid molecule or protein is delivered 15 with suitable pharmaceutical carriers, such as those described in the most recent edition of Remington's Pharmaceutical Sciences, A. Osol, a standard reference text in this field. The recombinant nucleic acid molecule or protein is delivered in a therapeutically effective amount. 20 Such amount is determined experimentally and is that amount which either restores normal conduction or improves abnormal conduction of cardiac cells. The amount of recombinant nucleic acid molecule or protein is preferably between 0.01 μ g and 100 mg, more preferably between 0.1 μ g and 10 mg, 25 more preferably between 1 μg and 1 mg, and most preferably between 10 μg and 1 mg. A single therapeutically effective amount is referred to as a bolus. Where adenovirus vectors are used, the amount of recombinant nucleic acid molecule is preferably between 10° plaque forming units (pfu) and 1015 30 pfu, more preferably between 10^8 pfu and 10^{14} pfu, and most preferably between 10° pfu and 1012 pfu. A single therapeutically effective amount of conduction protein genetic material is referred to as a bolus. In some embodiments of the present invention, the delivery of the 35 recombinant nucleic acid molecules or proteins is combined with steroid elution, such as with dexamethasone sodium

- 29 **-**

phosphate, beclamethasone, and the like, to control inflammatory processes.

The following examples are meant to be exemplary of the preferred embodiments of the invention and are not meant to be limiting.

PCT/US97/06103

EXAMPLES

WO 98/02150

Example 1: Isolation and Purification of Nucleic Acid Molecules Encoding the Connexin Proteins

Nucleic acid molecules encoding Cx43, Cx40, and 10 Cx45 are isolated and purified according to general methods well known to those skilled in the art. Briefly, total cellular RNA is isolated and purified (Chomczynsky, et al., Anal. Biochem., 1987, 162, 156-159) from heart tissue, cardiac transplantation donors, or from salvaged tissue, and 15 selected for poly(A) RNA (Sambrook et al., Molecular Cloning: A Laboratory Manual, Second Ed. Cold Spring Harbor Press (1989), pp. 7.26-7.29). cDNA corresponding to the connexin proteins is prepared from the poly(A) cardiac RNA by reverse transcription using a $GENEAMP^{TM}$ PCR kit (Perkin 20 Elmer Cetus, Norwalk, CT), or the like, using random hexamers according to the manufacturer's instructions. specific connexin nucleic acid molecules are amplified by the polymerase chain reaction (PCR), also using the $GENEAMP^{TM}$ PCR kit, or the like, using forward and reverse primers 25 specific for each of the different connexin proteins, according to the manufacturer's instructions. For example, the forward primer for Cx43 can be 5'-ATGCCTGACTGGACCGCCTTAGGC-3' (SEQ ID NO:7), and the reverse primer can be 5'-GATCTCGAGGTCATCAGGCCGAGG-3' (SEQ ID NO:8). 30 For example, the forward primer for Cx45 can be 5'-ATGAGTTGGAGCTTTCTGACTCGC-3' (SEQ ID NO:9), and the reverse primer can be 5'-AATCCAGACAGAGTTCTTCCCATC-3' (SEQ ID NO:10). For example, the forward primer for Cx40 can be 5'-ATGGGCGATTGGAGCTTCCTGGGA-3' (SEQ ID NO:11), and the reverse 35 primer can be 5'-CACTGATAGGTCATCTGACCTTGC-3' (SEQ ID NO:12). It is understood that additional primers can be used for

amplification as determined by those skilled in the art.

These primers may be preceded at the 5' terminus by nucleotide sequences containing endonuclease restriction sites for easy incorporation into vectors. The specific connexin nucleic acid molecules can also be amplified by PCR from human genomic DNA (Stratagene, San Diego, CA). After cutting the PCR products with the appropriate restriction endonuclease(s), the PCR products are purified by phenol:chloroform extractions, or using commercial purification kits, such as, for example, MAGICTM Minipreps DNA Purification System (Promega, Madison, WI). The specific nucleotide sequence of the PCR products is determined by conventional DNA sequencing procedures, and the identity of the PCR products confirmed by comparison to the published sequences for the connexin proteins.

Preferably, connexin cDNA is inserted into either plasmid or adenoviral vectors. Plasmid vectors include for example, pGEM3 or pBR322, as set forth in Acsadi, et al., The New Biol., 1991, 3, 71-81, and Gal, et al., Lab.

Invest., 1993, 68, 18-25. Adenoviral vectors include for example, adenovirus serotype 5, Ad5, as set forth in French,

et al., Circulation, 1994, 90, 2414-2424.

Preferably, the primers used to amplify the connexin nucleic acid molecules are designed with unique endonuclease restriction sites located at the 5' terminus. In the absence of such design, polylinker arms, containing unique restriction sites, can be ligated thereto. After cutting the purified PCR products with the appropriate

restriction endonuclease(s), the plasmid vector, comprising
30 a polylinker, is also cut with the same restriction
endonuclease(s), affording the connexin nucleic acid
molecule a site at which to ligate. In a similar manner,
recombinant adenovirus (Gluzman, et al., in Eukaryotic Viral
Vectors, Gluzman, ed., Cold Spring Harbor Press, 1982,

35 pp.187-192, and French, et al., Circulation, 1994, 90, 2414-2424) containing connexin cDNA molecules are prepared in

- 31 -

accordance with standard techniques well known to those skilled in the art.

It is contemplated that variations of the abovedescribed invention may be constructed that are consistent 5 with the spirit of the invention.

- 32 -

SEQUENCE LISTING

(1) GENERAL	INFORMATION
-------------	-------------

- (i) APPLICANTS: Stokes, Kenneth Morissette, Josée
- (ii) TITLE OF INVENTION: SYSTEM FOR GENETICALLY TREATING CARDIAC CONDUCTION DISTURBANCES
- (iii) NUMBER OF SEQUENCES: 12
- (iv) CORRESPONDENCE ADDRESS:
 - (A) ADDRESSEE: Woodcock Washburn Kurtz Mackiewicz & Norris LLP
 - (B) STREET: One Liberty Place 46th Floor
 - (C) CITY: Philadelphia
 - (D) STATE: PA
 - (E) COUNTRY: U.S.A.
 - (F) ZIP: 19103
- (v) COMPUTER READABLE FORM:
 - (A) MEDIUM TYPE: Floppy disk
 - (B) COMPUTER: IBM PC compatible
 - (C) OPERATING SYSTEM: PC-DOS/MS-DOS
 - (D) SOFTWARE: WordPerfect 6.1
- (vi) CURRENT APPLICATION DATA:
 - (A) APPLICATION NUMBER: N/A
 - (B) FILING DATE: Herewith
 - (C) CLASSIFICATION:
- (viii) ATTORNEY/AGENT INFORMATION:
 - (A) NAME: Paul K. Legaard
 - (B) REGISTRATION NUMBER: 38,534
 - (C) REFERENCE/DOCKET NUMBER: MEDT-0059
 - (ix) TELECOMMUNICATION INFORMATION:
 - (A) TELEPHONE: (215) 568-3100
 - (B) TELEFAX: (215) 568-3439
- (2) INFORMATION FOR SEQ ID NO:1:
 - (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 1074 bases
 - (B) TYPE: nucleic acid
 - (C) STRANDEDNESS: double
 - (D) TOPOLOGY: linear
 - (xi) SEQUENCE DESCRIPTION: SEQ ID NO:1:
- ATG GGC GAT TGG AGC TTC CTG GGA AAT TTC CTG GAG GAA GTA CAC

 Met Gly Asp Trp Ser Phe Leu Gly Asn Phe Leu Glu Glu Val His

 1 10 15
- AAG CAC TCG ACC GTG GTA GGC AAG GTC TGG CTC ACT GTC CTC TTC
 Lys His Ser Thr Val Val Gly Lys Val Trp Leu Thr Val Leu Phe
- ATA TTC CGT ATG CTC GTG CTG GGC ACA GCT GCT GAG TCT ACC TGG

 135

 146

 146

 146
- GGG GAT GAG CAG GCT GAT TTC CGG TGT GAT ACG ATT CAG CCT GGC
 Gly Asp Glu Gln Ala Asp Phe Arg Cys Asp Thr Ile Gln Pro Gly
 50
 60
- TGC CAC AAT GTC TGC TAC GAC CAG GCT TTC CCC ATC TCC CAC ATT

 Cys His Asn Val Cys Tyr Asp Gln Ala Phe Pro Ala Ser His Ile

 65

 70

 75

- 33 -

CGC Arg	TAC Tyr	TGG Trp	GTG Val	CTG Leu 80	CAG Gln	ATC Ile	ATC Ile	TTC Phe	GTC Val 85	TCT Ser	ACG Thr	CCC Pro	TCT Ser	CTG Leu 90	270
GTG Val	TAC Tyr	ATG Met	GGC Gly	CAC His 95	GCC Ala	ATG Met	CAC His	ACT Thr	GTG Val 100	CGC Arg	ATG Met	CAG Gln	GAG Glu	AAG Lys 105	315
CGC Arg	AAG Lys	CTA Leu	CGG Arg	GAG Glu 110	GCC Ala	GAG Glu	AGG Arg	GCC Ala	AAA Lys 115	GAG Glu	GTC Val	CGG Arg	GGC Gly	TCT Ser 120	360
GGC Gly	TCT Ser	TAC Tyr	GAG Glu	TAC Tyr 125	CCG Pro	GTG Val	GCA Ala	GAG Glu	AAG Lys 130	GCA Ala	GAA Glu	CTG Leu	TCC Ser	TGC Cys 135	405
TGG Trp	GAG Glu	GAA Glu	GGG Glu	AAT Asn 140	GGA Gly	AGG Arg	ATT Ile	GCC Ala	CTC Leu 145	CAG Gln	GGC Gly	ACT Thr	CTG Leu	CTC Leu 150	450
AAC Asn	ACC Thr	TAT Tyr	GTG Val	TGC Cys 155	AGC Ser	ATC Ile	CTG Leu	ATC Ile	CGC Arg 160	ACC Thr	ACC Thr	ATG Met	GAG Glu	GTG Val 165	495
GGC Gly	TTC Phe	ATT Ile	GTG Val	GGC Gly 170	CAG Gln	TAC Tyr	TTC Phe	ATC Ile	TAC Tyr 175	GGA Gly	ATC Ile	TTC Phe	CTG Leu	ACC Thr 180	540
ACC Thr	CTG Leu	CAT His	GTC Val	TGC Cys 185	CGC Arg	AGG Arg	AGT Ser	CCC Pro	TGT Cys 190	CCC Pro	CAC His	CCG Pro	GTC Val	AAC Asn 195	585
TGT Cys	TAC Tyr	GTA Val	TCC Ser	CGG Arg 200	CCC Pro	ACA Thr	GAG Glu	AAG Lys	AAT Asn 205	GTC Val	TTC Phe	ATT Ile	GTC Val	TTT Phe 210	630
ATG Met	CTG Leu	GCT Ala	GTG Val	GCT Ala 215	GCA Ala	CTG Leu	TCC Ser	CTC Leu	CTC Leu 220	CTT Leu	AGC Ser	CTG Leu	GCT Ala	GAA Glu 225	675
CTC Leu	TAC Tyr	CAC His	CTG Leu	GGC Gly 230	TGG Trp	AAG Lys	AAG Lys	ATC Ile	AGA Arg 235	CAG Gln	CGA Arg	TTT Phe	GTC Val	AAA Lys 240	720
CCG Pro	CGG Arg	CAG Gln	TAC Trp	ATG Met 245	GCT Ala	AAG Lys	TGC Cys	CAG Gln	CTT Leu 250	TCT Ser	GGC Gly	CCT Pro	CTG Leu	TGG Trp 255	765
GCT Ala	ATA Ile	GTC Val	CAG Gln	AGC Ser 260	TGC Cys	ACA Thr	CCA Pro	CCC Pro	CCC Pro 265	GAC Asp	TTT Phe	AAT Asn	CAG Gln	TGC Cys 270	810
CTG Leu	GAG Glu	AAT Asn	GGT Gly	CCT Pro 275	GGG Gly	GGA Gly	AAA Lys	TTC Phe	TTC Phe 280	AAT Asn	ccc Pro	TTC Phe	AGC Ser	AAT Asn 285	855
AAT Asn	ATG Met	GCC Al a	TCC Ser	CAA Gln 290	CAA Gln	AAC Asn	ACA Thr	GAC Asp	AAC Asn 295	CTG Leu	GTC Val	ACC Thr	GAG Glu	CAA Gln 300	900
GTA Val	CGA Arg	GGT Gly	CAG Gln	GAG Glu 305	CAG Gln	ACT Thr	CCT Pro	GGG Gly	GAA Glu 310	GGT Gly	TTC Phe	ATC Ile	CAG Gln	GTT Val 315	945

- 34 -

CGT TAT GGC CARREL Arg Tyr Gly G	AG AAG CO ln Lys Pi 320	CT GAG GT co Glu Va	G CCC AAT 1 Pro Asn 325	GGA GTC Gly Val	TCA CCA Ser Pro	GGT 990 Gly 330				
CAC CGC CTT CO	CC CAT GO ro His G: 335	GC TAT CA ly Tyr Hi	T AGT GAC s Ser Asp 340	AAG CGA Lys Arg	CGT CTT Arg Leu	AGT 1035 Ser 345				
AAG GCC AGC AG Lys Ala Ser So	GC AAG GG er Lys A: 350	CA AGG TC la Arg Se	A GAT GAC r Asp Asp 355	CTA TCA Leu Ser	GTG Val	1074				
(2) INFORMATION FOR SEQ ID NO:2: (i) SEQUENCE CHARACTERISTICS: (A) LENGTH: 358 amino acids (B) TYPE: amino acid (C) STRANDEDNESS: single (D) TOPOLOGY: unknown (xi) SEQUENCE DESCRIPTION: SEQ ID NO:2:										
Met Gly Asp T:	rp Ser Pl 5	ne Leu Gl	y Asn Phe 10	Leu Glu	Glu Val	His 15				
Lys His Ser T	nr Val Va 20	al Gly Ly	s Val Trp 25	Leu Thr	Val Leu	Phe 30				
Ile Phe Arg Me	et Leu Va 35	al Leu Gl	y Thr Ala 40	Ala Glu	Ser Thr	Trp 45				
Gly Asp Glu G	ln Ala As 50	sp Phe Ar	g Cys Asp 55	Thr Ile	Gln Pro	Gly 60				
Cys His Asn Va	al Cys Ty 65	r Asp Gl	n Ala Phe 70	Pro Ala	Ser His	Ile 75				
Arg Tyr Trp Va	al Leu Gl 80	n Ile Ile	e Phe Val 85	Ser Thr	Pro Ser	Leu 90				
Val Tyr Met G	ly His Al 95	a Met Hi	s Thr Val 100	Arg Met	Gln Glu	Lys 105				
Arg Lys Leu A	rg Glu Al 110	a Glu Arg	g Ala Lys 115	Glu Val	Arg Gly	Ser 120				
Gly Ser Tyr G	lu Tyr Pr 125	o Val Ala	a Glu Lys 130	Ala Glu	Leu Ser	Cys 135				
Trp Glu Glu G	lu Asn Gl 140	y Arg Ile	e Ala Leu 145		Thr Leu	Leu 150				
Asn Thr Tyr Va	al Cys Se 155	er Ile Le	u Ile Arg 160	Thr Thr	Met Glu	Val 165				
Gly Phe Ile Va	al Gly Gl 170	n Tyr Pho	e Ile Tyr 175	Gly Ile	Phe Leu	Thr 180				
Thr Leu His Va	al Cys Ar 185	g Arg Se	r Pro Cys 190	Pro His	Pro Val	Asn 195				
Cys Tyr Val Se	er Arg Pr 200	o Thr Gl	u Lys Asn 205	Val Phe	Ile Val	Phe 210				
Met Leu Ala Va	al Ala Al 215	.a Leu Se	r Leu Leu 220	Leu Ser	Leu Ala	Glu 225				
Leu Tyr His Le	eu Gly Tr 230	p Lys Ly	s Ile Arg 235	Gln Arg	Phe Val	Lys 240				

Pro	Arg	Gln	Trp	Met 245	Ala	Lys	Cys	Gln	Leu 250	Ser	Gly	Pro	Leu	Trp 255	
Ala	Ile	Val	Gln	Ser 260	Cys	Thr	Pro	Pro	Pro 265	Asp	Phe	Asn	Gln	Cys 270	
Leu	Glu	Asn	Gly	Pro 275	Gly	Gly	Lys	Phe	Phe 280	Asn	Pro	Phe	Ser	Asn 285	
Asn	Met	Ala	Ser	Gln 290	Gln	Asn	Thr	Asp	Asn 295	Leu	Val	Thr	Glu	Gln 300	
Val	Arg	Gly	Gln	Glu 305	Gln	Thr	Pro	Gly	Glu 310	Gly	Phe	Ile	Gln	Val 315	
Arg	Tyr	Gly	Gln	Lys 320	Pro	Glu	Val	Pro	Asn 325	Gly	Val	Ser	Pro	Gly 330	
His	Arg	Leu	Pro	His 335	Gly	Tyr	His	Ser	Asp 340	Lys	Arg	Arg	Leu	Ser 345	
Lys	Ala	Ser	Ser	Lys 350	Ala	Arg	Ser	Asp	Asp 355	Leu	Ser	Val			
(2)	(i)	SE(() () ()	QUENCA) LI B) T C) S D) T	CE CI ENGTI (PE: FRANI OPOL(HARAC H: 11 nucl DEDNI DGY:	TERI 146 l leic ESS: line	NO:3: ISTIC Dases acid doublear ON: 5	CS: i ole	ID NO	D:3:					
ATG Met	GGT Gly	GAC Asp	TGG Trp	AGC Ser 5	GCC Ala	TTA Leu	GGC Gly	AAA Lys	CTC Leu 10	CTT Leu	GAC Asp	AAG Lys	GTT Val	CAA Gln 15	4.5
GCC Ala	TAC Tyr	TCA Ser	ACT Thr	GCT Ala 20	GGA Gly	GGG Gly	AAG Lys	GTG Val	TGG Trp 25	CTG Leu	TCA Ser	GTA Val	CTT Leu	TTC Phe 30	90
ATT Ile	TTC Phe	CGA Arg	ATC Ile	CTG Leu 35	CTG Leu	CTG Leu	GGG Gly	ACA Thr	GCG Ala 40	GTT Val	GAG Glu	TCA Ser	GCC Ala	TGG Trp 45	135
GGA Gly	GAT Asp	GAG Glu	CAG Gln	TCT Ser 50	GCC Ala	TTT Phe	CGT Arg	TGT Cys	AAC Asn 55	ACT Thr	CAG Gln	CAA Gln	CCT Pro	GGT Gly 60	180
TGT Cys	GAA Glu	AAT Asn	GTC Val	TGC Cys 65	TAT Tyr	GAC Asp	AAG Lys	TCT Ser	TTC Phe 70	CCA Pro	ATC Ile	TCT Ser	CAT	GTG Val 75	225
CGC Arg	TTC Phe	TGG Trp	GTC Val	CTG Leu 80	CAG Gln	ATC Ile	ATA Ile	TTT Phe	GTG Val 85	TCT Ser	GTA Val	CCC Pro	ACA Thr	CTC Leu 90	270
TTG Leu	TAC Tyr	CTG Leu	GCT Ala	CAT His	GTG Val	TTC Phe	TAT	GTG Val	ATG Met 100	CGA Arg	AAG Lys	GAA Glu	GAG Glu	AAA Lys 105	31!
CTG Leu	AAC Asn	AAG Lys	AAA Lys	GAG Glu 110	Glu	GAA Glu	CTC Leu	AAG Lys	GTT Val 115	GCC Ala	CAA Gln	ACT Thr	GAT Asp	GGT Gly 120	360
GTC Val	AAT Asn	GTG Val	GAC Asp	ATG Met	His	TTG Leu	AAG Lys	CAG Gln	ATT Ile 130	GAG Glu	ATA Ile	AAG Lys	AAG Lys	TTC Phe 135	40

- 36 -

AAG Lys	TAC Tyr	GGT Gly	ATT	GAA Glu 140	GAG Glu	CAT	GGT Gly	AAG Lys	GTG Val 145	AAA Lys	ATG Met	CGA Arg	GGG Gly	GG(Gl _y 15(,
TTG Leu	CTG Leu	CGA Arg	ACC Thr	TAC Tyr 155	ATC Ile	ATC Ile	AGT Ser	ATC Ile	CTC Leu 160	TTC Phe	AAG Lys	TCT Ser	ATC Ile	TTT Phe 165	:
Glu	Val	GCC Ala	Phe	Leu 170	Leu	Ile	Gln	Trp	Tyr 175	Ile	Tyr	Gly	Phe	Ser 180	
TTG Leu	AGT Ser	GCT Ala	GTT Val	TAC Tyr 185	ACT Thr	TGC Cys	AAA Lys	AGA Arg	GAT Asp 190	CCC Pro	TGC Cys	CCA Pro	CAT	CAG Gln 195	ı
GTG Val	GAC Asp	TGT Cys	TTC Phe	CTC Leu 200	TCT Ser	CGC Arg	CCC	ACG Thr	GAG Glu 205	AAA Lys	ACC Thr	ATC Ile	TTC Phe	ATC Ile 210	
ATC Ile	TTC Phe	ATG Met	CTG Leu	GTG Val 215	GTG Val	TCC Ser	TTG Leu	GTG Val	TCC Ser 220	CTG Leu	GCC Ala	TTG Leu	AAT Asn	ATC Ile 225	675
ATT Ile	GAA Glu	CTC Leu	TTC Phe	TAT Tyr 230	GTT Val	TTC Phe	TTC Phe	AAG Lys	GGC Gly 235	GTT Val	AAG Lys	GAT Asp	CGG Arg	GTT Val 240	720
AAG Lys	GGA Gly	AAG Lys	AGC Cys	GAC Asp 245	CCT Pro	TAC Tyr	CAT His	GCG Ala	ACC Thr 250	AGT Ser	GGT Gly	GCG Ala	CTG Leu	AGC Ser 255	765
CCT Pro	GCC Ala	AAA Lys	GAC Asp	TGT Cys 260	GGG Gly	TCT Ser	CAA Gln	AAA Lys	TAT Tyr 265	GCT Ala	TAT Tyr	TTC Phe	AAT Asn	GGC Gly 270	810
TGC Cys	TCC Ser	TCA Ser	CCA Pro	ACC Thr 275	GCT Ala	CCC Pro	CTC Leu	TCG Ser	CCT Pro 280	ATG Met	TCT Ser	CCT Pro	CCT Pro	GGG Gly 285	855
TAC Tyr	AAG Lys	CTG Leu	GTT Val	ACT Thr 290	GGC Gly	GAC Asp	AGA Arg	AAC Asn	AAT Asn 295	TCT Ser	TCT Ser	TGC Cys	CGC Arg	AAT Asn 300	900
TAC Tyr	AAC Asn	AAG Lys	CAA Gln	GCA Ala 305	AGT Ser	GAG Glu	CAA Gln	AAC Asn	TGG Trp 310	GCT Ala	AAT Asn	TAC Tyr	AGT Ser	GCA Ala 315	945 ·
GAA Glu	CAA Gln	AAT Asn	CGA Arg	ATG Met 320	GGG Gly	CAG Gly	GCG Ala	GGA Gly	AGC Ser 325	ACC Thr	ATC Ile	TCT Ser	AAC Asn	TCC Ser 330	990
CAT His	GCA Ala	CAG Gln	CCT Pro	TTT Phe 335	GAT Asp	TTC Phe	CCC Pro	GAT Asp	GAT Asp 340	AAC Asn	CAG Gln	AAT Asn	TCT Ser	AAA Lys 345	1035
AAA Lys	CTA Leu	GCT Ala	GCT Ala	GGA Gly 350	CAT His	GAA Glu	TTA Leu	CAG Gln	CCA Pro 355	CTA Leu	GCC Ala	ATT Ile	GTG Val	GAC Asp 360	1080
CAG Gln	CGA Arg	CCT Pro	TCA Ser	AGC Ser 365	AGA Arg	GCC Ala	AGC Ser	AGT Ser	CGT Arg 370	GCC Ala	AGC Ser	AGC Ser	AGA Arg	CCT Pro 375	1125
		GAT Asp													1146

								- :	37 -	-				
(2)	(i)	SE(() () ()	c) s1	E CHENGTH PE: RANI POLO	HARAC H: 38 amir DEDNE DGY:	TERI 32 an 10 ac ESS: unkr	ISTIC mino cid sing nown	cs: acid): 4 :				
Met 1	Gly	Asp	Trp	Ser 5	Ala	Leu	Gly	Lys	Leu 10	Leu	qaA	Lys	Val	Gln 15
Ala	Tyr	Ser	Thr	Ala 20	Gly	Gly	Lys	Val	Trp 25	Leu	Ser	Val	Leu	Phe 30
Ile	Phe	Arg	Ile	Leu 35	Leu	Leu	Gly	Thr	Ala 40	Val	Glu	Ser	Ala	Trp 45
Gly	Asp	Glu	Gln	Ser 50	Ala	Phe	Arg	Cys	Asn 55	Thr	Gln	Gln	Pro	Gly 60
Cys	Glu	Asn	Val	Cys 65	Tyr	Asp	Lys	Ser	Phe 70	Pro	Ile	Ser	His	Val 75
Arg	Phe	Trp	Val	Leu 80	Gln	Ile	Ile	Phe	Val 85	Ser	Val	Pro	Thr	Leu 90
Leu	туг	Leu	Ala	His 95	Val	Phe	Tyr	Val	Met 100	Arg	Lys	Glu	Glu	Lys 105
Leu	Asn	Lys	Lys	Glu 110	Glu	Glu	Leu	Lys	Val 115	Ala	Gln	Thr	Asp	Gly 120
Val	Asn	Val	Asp	Met 125	His	Leu	Lys	Gln	Ile 130	Glu	Ile	Lys	Lys	Phe 135
Lys	Tyr	Gly	Ile	Glu 140	Glu	His	Gly	Lys	Val 145	Lys	Met	Arg	Gly	Gly 150
Leu	Leu	Arg	Thr	Tyr 155	Ile	Ile	Ser	Ile	Leu 160	Phe	Lys	Ser	Ile	Phe 165
Glu	Val	Ala	Phe	Leu		Ile	Gln	Trp	Tyr	Ile	Tyr	Gly	Phe	Ser

Leu Ser Ala Val Tyr Thr Cys Lys Arg Asp Pro Cys Pro His Gln

Val Asp Cys Phe Leu Ser Arg Pro Thr Glu Lys Thr Ile Phe Ile

Ile Phe Met Leu Val Val Ser Leu Val Ser Leu Ala Leu Asn Ile

Ile Glu Leu Phe Tyr Val Phe Phe Lys Gly Val Lys Asp Arg Val

Lys Gly Lys Cys Asp Pro Tyr His Ala Thr Ser Gly Ala Leu Ser

Pro Ala Lys Asp Cys Gly Ser Gln Lys Tyr Ala Tyr Phe Asn Gly

Cys Ser Ser Pro Thr Ala Pro Leu Ser Pro Met Ser Pro Pro Gly

- 38 -

Tyr	Lys	Leu	Val	Thr 290	Gly	Asp	Arg	Asn	Asn 295		Ser	Cys	Arg	Asn 300	
Tyr	Asn	Lys	Gln	Ala 305		Glu	Gln	Asn	Trp		Asn	Tyr	Ser	Ala 315	
Glu	Gln	Asn	Arg	Met 320	Gly	Gly	Ala	Gly	Ser 325		Ile	Ser	Asn	Ser 330	
His	Ala	Gln	Pro	Phe 335	Asp	Phe	Pro	Asp	Asp 340		Gln	Asn	Ser	Lys 345	
Lys	Leu	Ala	Ala	Gly 350	His	Glu	Leu	Gln	Pro 355	Leu	Ala	Ile	Val	Asp 360	
Gln	Arg	Pro	Ser	Ser 365	Arg	Ala	Ser	Ser	Arg 370	Ala	Ser	Ser	Arg	Pro 375	
Arg	Pro	Asp	Asp	Leu 380	Glu	Ile									
(2)	(i)) SE(() () ()	QUEN A) L B) T C) S O) T	CE CI ENGTI YPE: TRANI OPOLO	HARA H: 1: nuc: DEDNI DGY:	ID D CTER: 188 D leic ESS: line	ISTI pase: aci doul ear	CS: s d	ro w	N. F					
ATG Met 1	AGT Ser	TGG Trp	AGC Ser	TTT Phe 5	CTG Leu	ACT Thr	CGC Arg	CTG Leu	CTA Leu 10	GAG Glu	GAG Glu	ATT Ile	CAC His	AAC Asn 15	45
CAT His	TCC Ser	ACA Thr	TTT Phe	GTG Val 20	GGG Gly	AAG Lys	ATC Ile	TGG Trp	CTC Leu 25	ACT Thr	GTT Val	CTG Leu	ATT Ile	GTC Val 30	90
TTC Phe	CGG Arg	ATC Ile	GTC Val	CTT Leu 35	ACA Thr	GCT Ala	GTA Val	GGA Gly	GGA Gly 40	GAA Glu	TCC Ser	ATC Ile	TAT Tyr	TAC Tyr 45	135
GAT Asp	GAG Glu	CAA Gln	AGC Ser	AAA Lys 50	TTT Phe	GTG Val	TGC Cys	AAC Asn	ACA Thr 55	GAA Glu	CAG Gln	CCG Pro	GGC Gly	TGT Cys 60	180
GAG Glu	AAT Asn	GTC Val	TGT Cys	TAT Tyr 65	GAT Asp	GCG Ala	TTT Phe	GCA Ala	CCT Pro 70	CTC Leu	TCC Ser	CAT His	GTA Val	CGC Arg 75	225
TTC Phe	TGG Trp	GTG Val	TTC Phe	CAG Gln 80	ATC Ile	ATC Ile	CTG Leu	GTG Val	GCA Ala 85	ACT Thr	CCC Pro	TCT Ser	GTG Val	ATG Met 90	270
TAC Tyr	CTG Leu	GGC Gly	TAT Tyr	GCT Ala 95	ATC Ile	CAC His	AAG Lys	ATT Ile	GCC Ala 100	AAA Lys	ATG Met	GAG Glu	CAC His	GGT Gly 105	315
GAA Glu	GCA Ala	GAC Asp	AAG Lys	AAG Lys 110	GCA Ala	GCT Ala	CGG Arg	AGC Ser	AAG Lys 115	CCC Pro	TAT Tyr	GCA Ala	ATG Met	CGC Arg 120	360
TGG Trp	AAA Lys	CAA Gln	CAC His	CGG Arg 125	GCT Ala	CTG Leu	GAA Glu	GAA Glu	ACG Thr 130	GAG Glu	GAG Glu	GAC Asp	AAC Asn	GAA Glu 135	405

- 39 -

GAG Glu	GAT Asp	CCT Pro	ATG Met	ATG Met 140	TAT Tyr	CCA Pro	GAG Glu	ATG Met	GAG Glu 145	TTA Leu	GAA Glu	AGT Ser	GAT Asp	AAG Lys 150	450
GAA Glu	AAT Asn	AAA Lys	GAG Glu	CAG Gln 155	AGC Ser	CAA Gln	CCC Pro	AAA Lys	CCT Pro 160	AAG Lys	CAT His	GAT Asp	GGC Gly	CGA Arg 165	495
CGA Arg	CGG Arg	ATT Ile	CGG Arg	GAA Glu 170	GAT Asp	GGG Gly	CTC Leu	ATG Met	AAA Lys 175	ATC Ile	TAT Tyr	GTG Val	CTG Leu	CAG Gln 180	540
TTG Leu	CTG Leu	GCA Ala	AGG Arg	ACC Thr 185	GTG Val	TTT Phe	GAG Glu	GTG Val	GGT Gly 190	TTT Phe	CTG Leu	ATA Ile	GGG Gly	CAG Gln 195	585
TAT Tyr	TTT Phe	CTG Leu	TAT Tyr	GGC Gly 200	TTC Phe	CAA Gln	GTC Val	CAC His	CCG Pro 205	TTT Phe	TAT Tyr	GTG Val	TGC Cys	AGC Ser 210	630
AGA Arg	CTT Leu	CCT Pro	TGT Cys	CCT Pro 215	CAT His	AAG Lys	ATA Ile	GAC Asp	TGC Cys 220	TTT Phe	ATT Ile	TCT Ser	AGA Arg	CCC Pro 225	675
ACT Thr	GAA Glu	AAG Lys	ACC Thr	ATC Ile 230	TTC Phe	CTT Leu	CTG Leu	ATA Ile	ATG Met 235	TAT Tyr	GGT Gly	GTT Val	ACA Thr	GGC Gly 240	720
CTT Leu	TGC Cys	CTC Leu	TTG Leu	CTT Leu 245	AAC Asn	ATT Ile	TGG Trp	GAG Glu	ATG Met 250	CTT Leu	CAT His	TTA Leu	GGG Gly	TTT Phe 255	765
GGG Gly	ACC Thr	ATT Ile	CGA Arg	GAC Asp 260	TCA Ser	CTA Leu	AAC Asn	AGT Ser	AAA Lys 265	AGG Arg	AGG Arg	GAA Glu	CTT Leu	GAG Glu 270	810
GAT Asp	CCG Pro	GGT Gly	GCT Ala	TAT Tyr 275	AAT Asn	TAT Tyr	CCT Pro	TTC Phe	ACT Thr 280	TGG Trp	AAT Asn	ACA Thr	CCA Pro	TCT Ser 285	855
GCT Ala	CCC Pro	CCT Pro	GGC Gly	TAT Tyr 290	AAC Asn	ATT Ile	GCT Ala	GTC Val	AAA Lys 295	CCA Pro	GAT Asp	CAA Gln	ATC Ile	CAG Gln 300	900
TAC Tyr	ACC Thr	GAA Glu	CTG Leu	TCC Ser 305	AAT Asn	GCT Ala	AAG Lys	ATC Ile	GCC Ala 310	TAC Tyr	AAG Lys	CAA Gln	AAC Asn	AAG Lys 315	945
GCC Ala	AAC Asn	ACA Thr	GCC Ala	CAG Gln 320	GAA Glu	CAG Gln	CAG Gln	TAT Tyr	GGC Gly 325	AGC Ser	CAT His	GAG Glu	GAG Glu	AAC Asn 330	990
CTC Leu	CCA Pro	GCT Ala	GAC Asp	CTG Leu 335	GAG Glu	GCT Ala	CTG Leu	CAG Gln	CGG Arg 340	GAG Glu	ATC Ile	AGG Arg	ATG Met	GCT Ala 345	1035
CAG Gln	GAA Glu	CGC Arg	TTG Leu	GAT Asp 350	CTG Leu	GCA Ala	GTT Val	CAG Gln	GCC Ala 355	TAC Tyr	AGT Ser	CAC His	CAA Gln	AAC Asn 360	1080
AAC Asn	CCT Pro	CAT His	GGT Gly	CCC Pro 365	Arg	GAG Glu	AAG Lys	AAG Lys	GCC Ala 370	AAA Lys	GTG Val	GGG Gly	TCC Ser	AAA Lys 375	1125
GCT Ala	GGG Gly	TCC Ser	AAC Asn	AAA Lys 380	Ser	ACT Thr	GCC Ala	AGT Ser	AGC Ser 385	AAA Lys	TCA Ser	GGG Gly	GAT Asp	GGG Gly 390	1170

- 40 -

AAG AAC TCT GTC TGG ATT
Lys Asn Ser Val Trp Ile 395

- (2) INFORMATION FOR SEQ ID NO:6:
 (i) SEQUENCE CHARACTERISTICS:

 - (A) LENGTH: 396 amino acids
 (B) TYPE: amino acid
 (C) STRANDEDNESS: single
 (D) TOPOLOGY: unknown
 (xi) SEQUENCE DESCRIPTION: SEQ ID NO:6

	(xi) SE	QUEN	CE D	ESCR	IPTI	ON:	SEQ	ID N	0:6:				
Met 1	Ser	Trp	Ser	Phe 5	Leu	Thr	Arg	Leu	Leu 10	Glu	Glu	Ile	His	Asn 15
His	Ser	Thr	Phe	Val 20	Gly	Lys	Ile	Trp	Leu 25	Thr	Val	Leu	Ile	Val 30
Phe	Arg	Ile	Val	Leu 35	Thr	Ala	Val	Gly	Gly 40	Glu	Ser	Ile	Tyr	Tyr 45
Asp	Glu	Gln	Ser	Lys 50	Phe	Val	Cys	Asn	Thr 55	Glu	Gln	Pro	Gly	Cys 60
Glu	Asn	Val	Cys	Tyr 65	Asp	Ala	Phe	Ala	Pro 70	Leu	Ser	His	Val	Arg 75
Phe	Trp	Val	Phe	Gln 80	Ile	Ile	Leu	Val	Ala 85	Thr	Pro	Ser	Val	Met 90
Tyr	Leu	Gly	Tyr	Ala 95	Ile	His	Lys	Ile	Ala 100	Lys	Met	Glu	His	Gly 105
Glu	Ala	Asp	Lys	Lys 110	Ala	Ala	Arg	Ser	Lys 115	Pro	Tyr	Ala	Met	Arg 120
Trp	Lys	Gln	His	Arg 125	Ala	Leu	Glu	Glu	Thr 130	Glu	Glu	Asp	Asn	Glu 135
Glu	Asp	Pro	Met	Met 140	Tyr	Pro	Glu	Met	Glu 145	Leu	Glu	Ser	Asp	Lys 150
Glu	Asn	Lys	Glu	Gln 155	Ser	Gln	Pro	Lys	Pro 160	Lys	His	Asp	Gly	A rg 165
Arg	Arg	Ile	Arg	Glu 170	Asp	Gly	Leu	Met	Lys 175	Ile	Tyr	Val	Leu	Gln 180
Leu	Leu	Ala	Arg	Thr 185	Val	Phe	Glu	Val	Gly 190	Phe	Leu	Ile	Gly	Gln 195
Tyr	Phe	Leu	Tyr	Gly 200	Phe	Gln	Val	His	Pro 205	Phe	Tyr	Val	Cys	Ser 210
Arg	Leu	Pro	Cys	Pro 215	His	Lys	Ile	Asp	Cys 220	Phe	Ile	Ser	Arg	Pro 225
Thr	Glu	Lys	Thr	Ile 230	Phe	Leu	Leu	Ile	Met 235	Tyr	Gly	Val	Thr	Gly 240
Leu	Cys	Leu	Leu	Leu 245	Asn	Ile	Trp	Glu	Met 250	Leu	His	Leu	Gly	Phe 255
Gly	Thr	Ile	Arg	Asp 260	Ser	Leu	Asn	Ser	Lys 265	Arg	Arg	Glu	Leu	Glu 270

PCT/US97/06103 WO 98/02150

- 41 -

Asp Pro Gly Ala Tyr Asn Tyr Pro Phe Thr Trp Asn Thr Pro Ser 280 Ala Pro Pro Gly Tyr Asn Ile Ala Val Lys Pro Asp Gln Ile Gln Tyr Thr Glu Leu Ser Asn Ala Lys Ile Ala Tyr Lys Gln Asn Lys 310 Ala Asn Thr Ala Gln Glu Gln Gln Tyr Gly Ser His Glu Glu Asn 325 Leu Pro Ala Asp Leu Glu Ala Leu Gln Arg Glu Ile Arg Met Ala Gln Glu Arg Leu Asp Leu Ala Val Gln Ala Tyr Ser His Gln Asn Asn Pro His Gly Pro Arg Glu Lys Lys Ala Lys Val Gly Ser Lys 365 Ala Gly Ser Asn Lys Ser Thr Ala Ser Ser Lys Ser Gly Asp Gly Lys Asn Ser Val Trp Ile

- (2) INFORMATION FOR SEQ ID NO:7:
 - (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 24 bases
 - (B) TYPE: nucleic acid
 - (C) STRANDEDNESS: single
 - (D) TOPOLOGY: linear
 - (xi) SEQUENCE DESCRIPTION: SEQ ID NO:7:

ATGCCTGACT GGACCGCCTT AGGC 24

- (2) INFORMATION FOR SEQ ID NO:8:
 - (i) SEQUENCE CHARACTERISTICS:

 - (A) LENGTH: 24 bases (B) TYPE: nucleic acid
 - (C) STRANDEDNESS: single
 - (D) TOPOLOGY: linear
 - (xi) SEQUENCE DESCRIPTION: SEQ ID NO:8:

GATCTCGAGG TCATCAGGCC GAGG 24

- (2) INFORMATION FOR SEQ ID NO:9:
 - (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 24 bases
 - (B) TYPE: nucleic acid
 - (C) STRANDEDNESS: single
 - (D) TOPOLOGY: linear
 - (xi) SEQUENCE DESCRIPTION: SEQ ID NO:9:

ATGAGTTGGA GCTTTCTGAC TCGC 24

- (2) INFORMATION FOR SEQ ID NO:10:
 - (i) SEQUENCE CHARACTERISTICS:
 - (A) LENGTH: 24 bases
 - (B) TYPE: nucleic acid
 - (C) STRANDEDNESS: single
 (D) TOPOLOGY: linear
 - (xi) SEQUENCE DESCRIPTION: SEQ ID NO:10:

AATCCAGACA GAGTTCTTCC CATC 24

- 42 -

- (2) INFORMATION FOR SEQ ID NO:11: (i) SEQUENCE CHARACTERISTICS:
 - - (A) LENGTH: 24 bases
 (B) TYPE: nucleic acid
 (C) STRANDEDNESS: single
 - (D) TOPOLOGY: linear
 - (xi) SEQUENCE DESCRIPTION: SEQ ID NO:11:

ATGGGCGATT GGAGCTTCCT GGGA 24

- (2) INFORMATION FOR SEQ ID NO:12:
 - (i) SEQUENCE CHARACTERISTICS:
 (A) LENGTH: 24 bases

 - (B) TYPE: nucleic acid
 - (C) STRANDEDNESS: single
 (D) TOPOLOGY: linear
 (xi) SEQUENCE DESCRIPTION: SEQ ID NO:12:

CACTGATAGG TCATCTGACC TTGC 24

WHAT IS CLAIMED IS:

25

A delivery system for delivering a
therapeutically effective amount of a predetermined genetic
material to an identified cardiac location of a patient's
heart, said genetic material being selected for the function
of altering the conductivity of cardiac cells to which it is
delivered, comprising:

a supply of said genetic material;
reservoir means for containing said genetic
material; and

delivery means for delivering said genetic material from said reservoir to said identified cardiac location so as to contact a plurality of cells in the proximity of said cardiac location, thereby changing the conductivity of said cells and improving the cardiac function of said heart.

2. The delivery system of claim 1, wherein said delivery means comprises a catheter with a distal end having an opening at said distal end, said delivery means

comprising means for delivering said genetic material from said reservoir through said opening, and further comprising:

mapping electrode means positioned at said distal portion for carrying out mapping of the patient's heart so as to identify said cardiac location; and

- conductor means for connecting said mapping electrode means to the proximal end of said catheter.
- 3. The delivery system of claim 1, wherein said supply of genetic material comprises a bolus of conduction protein genetic material selected for the function of enhancing cardiac cell conductivity.
 - 4. The delivery system of claim 1, wherein said delivery means comprises a catheter with a distal end

- 44 -

portion, and said reservoir means is located in said distal end portion.

- 5. The delivery system of claim 4, wherein said distal end portion comprises a hollow helical element
 5 forming an interior, and said reservoir means comprises said interior with said supply therein.
- 6. The delivery system of claim 1, wherein said delivery means comprises a catheter with a lumen for delivering said genetic material therethrough, said catheter having a distal tip communicating with said lumen for contacting said plurality of cells in the proximity of said cardiac location with said genetic material.
 - 7. The delivery system of claim 6, wherein said distal tip is a hollow helical needle tip.
- 15 8. The delivery system of claim 6, wherein said catheter is a transvenous endocardial catheter.
 - 9. The delivery system of claim 1, wherein said reservoir contains a supply of 0.1-10 ml of said genetic material.
- 20 10. The delivery system of claim 1, wherein said delivery means comprises a catheter with a distal portion and an end tip, and wherein said reservoir means is contained in said distal portion, and further comprising force means for forcing said genetic material from said reservoir means and out of said end tip.
 - 11. The delivery system of claim 10, wherein said force means comprises a stylet.

- 12. The delivery system of claim 1, wherein said delivery system comprises a hollow helical screw-in element loaded with a bolus of said genetic material.
- 13. The delivery system of claim 1, wherein said element comprises ports for egress of said genetic material into said identified cardiac location when said element is screwed into said location, and further comprising soluble plugs in said ports to maintain them normally closed but which dissolve when said element is positioned within said patient's heart.
 - 14. The delivery system of claim 1, wherein said predetermined genetic material is DNA or RNA, and imparts chronic change in conductive properties to said cardiac cells.
- 15. The delivery system of claim 14, wherein said DNA or RNA encodes cardiac gap junction proteins.
 - 16. The delivery system of claim 15, wherein said cardiac gap junction proteins are connexin proteins selected from the group consisting of Cx40, Cx43, and Cx45.
- 20 17. The delivery system of claim 1, wherein said predetermined genetic material is protein, and imparts acute change in conductive properties to said cardiac cells.
 - 18. The delivery system of claim 17, wherein said protein is cardiac gap junction protein.
- 25 19. The delivery system of claim 17, wherein said cardiac gap junction proteins are connexin proteins selected from the group consisting of Cx40, Cx43, and Cx45.
 - 20. An implantable delivery system for delivering doses of a therapeutically effective amount of a

- 46 -

predetermined genetic material to an identified cardiac location, comprising:

a supply of genetic material of the class having the property of altering the conductivity of cardiac cells to which it is delivered;

a catheter, said catheter having a distal tip portion for engaging the cells of said cardiac location and delivering thereto said genetic material;

reservoir means for holding said supply of genetic
material and providing it to said distal tip portion of said
catheter; and

delivery means for delivering a therapeutically effective amount of said genetic material from said reservoir means through said distal tip portion to said cardiac location.

21. The system as described in claim 20, further comprising:

control means for controlling operation of said delivery means to deliver respective said doses.

- 22. The implantable delivery system of claim 20, wherein said control means comprises initiating means for initiating delivery of said genetic material, said initiating means comprising an external programmer.
- 23. The implantable delivery system of claim 20, wherein said control means comprises automatic means for automatically initiating delivery of said genetic material.
- 24. A combined mapping and delivery system for delivering a therapeutically effective amount of a predetermined genetic material to an identified cardiac location of a patient's heart, said genetic material being selected for the function of altering the conductivity of cardiac cells to which it is delivered, comprising:

a supply of said genetic material;

- 47 -

reservoir means for containing said genetic material;

mapping means for identifying cardiac location
within a patient's heart; and

delivery means within said mapping means for delivering said genetic material from said reservoir to said identified cardiac location so as to contact a plurality of cells in the proximity of said cardiac location, thereby changing the conductivity of said cells and improving the cardiac function of said heart.

25. The combined mapping and delivery system of claim 24, wherein said mapping means comprises a catheter or peelable introducer sheath having two electrodes and said delivery means comprises a catheter having a distal end portion comprising a hollow helical element.

1/6

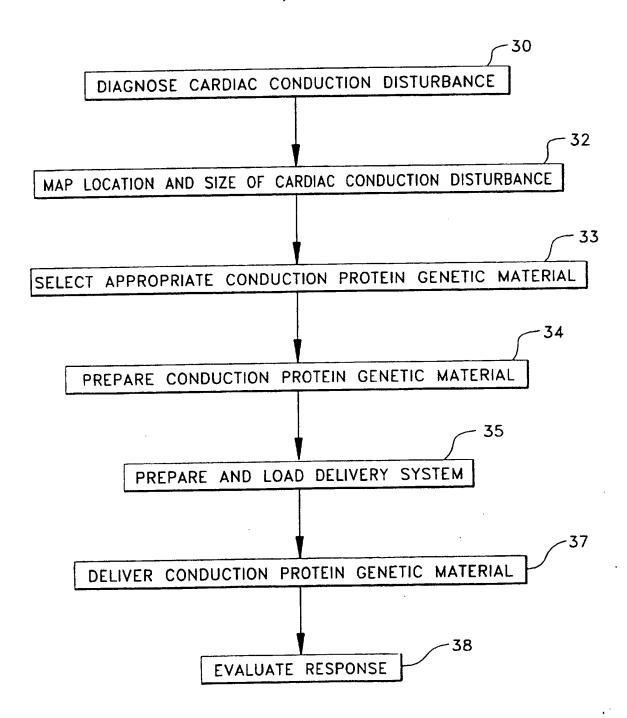


FIG. 1

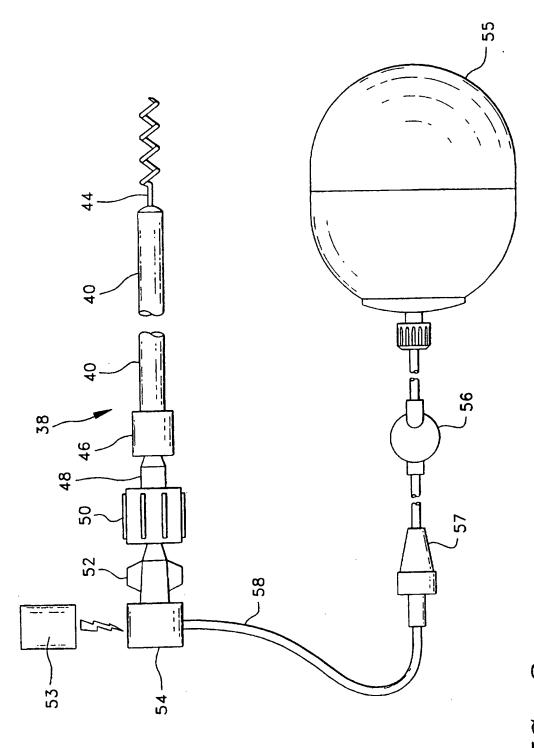
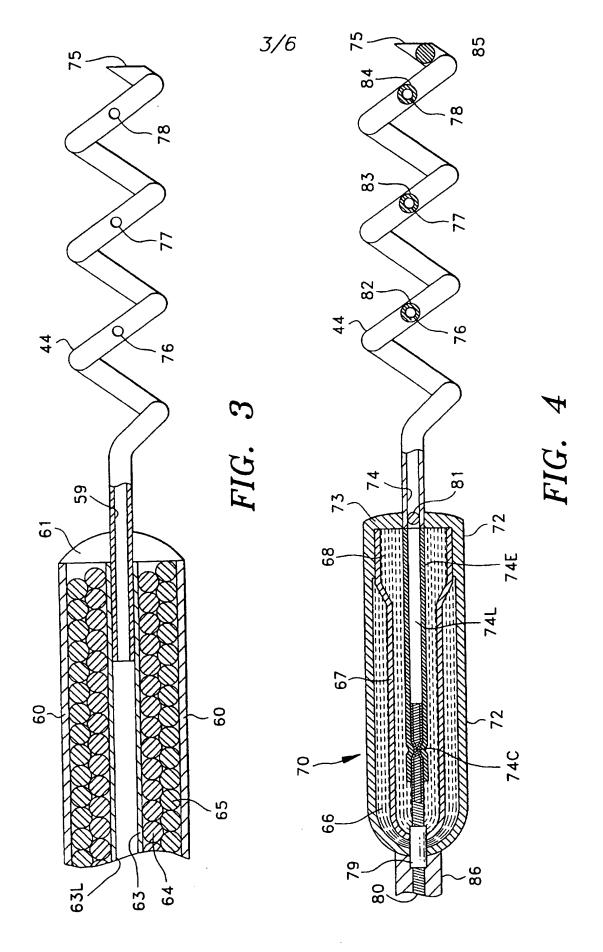
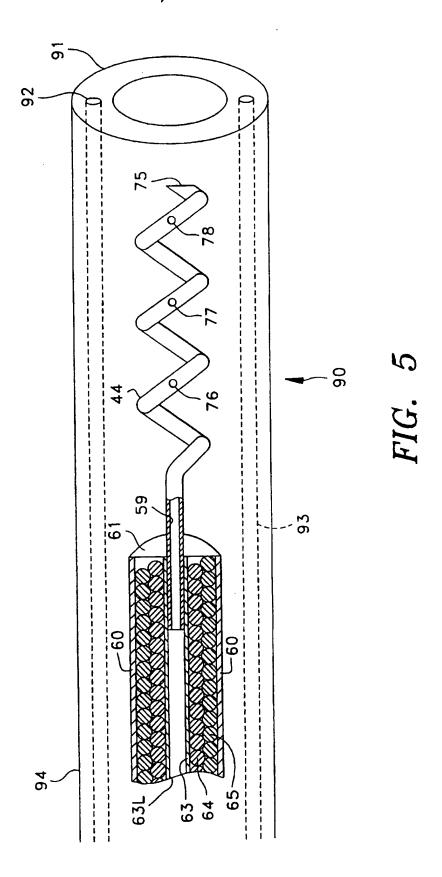
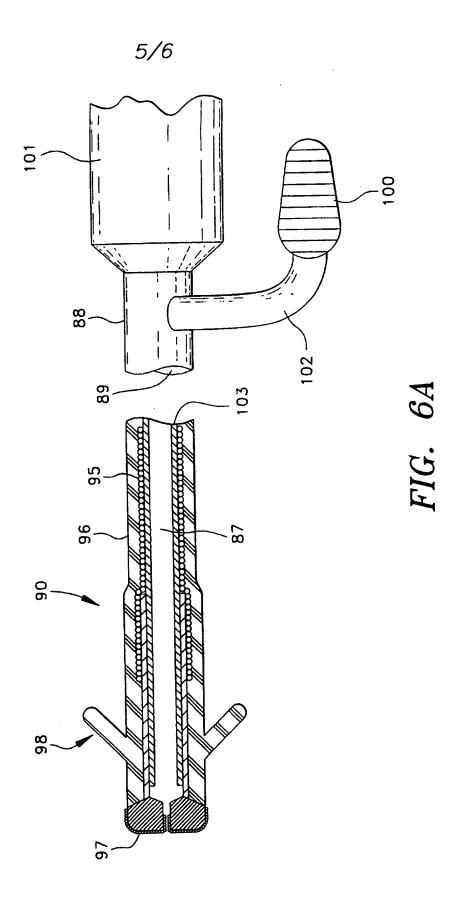


FIG. A







6/6

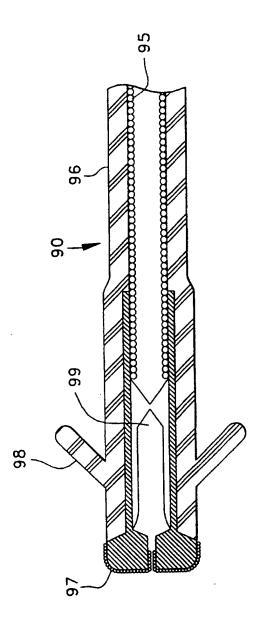


FIG. 6B

INTERNATIONAL SEARCH REPORT

International application No. PCT/US97/06103

A. CLASSIFICATION OF SUBJECT MATTER									
	A61K 31/00; A01N 43/04; C07H 21/04								
US CL :	604/53; 514/44; 536/23.5 International Patent Classification (IPC) or to both r	national classification and IPC							
	DS SEARCHED								
	Minimum documentation searched (classification system followed by classification symbols)								
		, , , , ,							
U.S. : 6	04/53; 514/44; 536/23.5								
Documentati	on searched other than minimum documentation to the	extent that such documents are included	in the fields searched						
		- 6 data have and where practicable	scarch terms used)						
Electronic da	ata base consulted during the international search (nam	ne of data base and, where practices.	,						
Please Se	e Extra Sheet.								
C. DOC	UMENTS CONSIDERED TO BE RELEVANT								
Category*	Citation of document, with indication, where app	propriate, of the relevant passages	Relevant to claim No.						
Υ	WO 94/11506 A1 (ARCH DEVELO 26 May 1994, see entire documen		1-25						
Y	US 5,328,470 A (NABEL ET AL.) 12 July 1994, see entire document.								
Y	FISHMAN et al. Molecular Characterization and Functional Expression of the Human Cardiac Gap Junction Channel. J. Cell Biol. August 1990, Vol. 111, pages 589-598, see entire document.								
Y	KANTER et al. Molecular Cloning of Junction Proteins, Connexin40 and Cardiol. 1994, Vol. 26, pages document.	Connexin45. J. Moi. Cell	1-25						
<u> </u>									
X Furth	er documents are listed in the continuation of Box C.	See patent family annex.							
• Spe	cial categories of cited documents:	"I" later document published after the int date and not in conflict with the applic	SPECION DAY CHOOK IN IMPROVISION INC.						
'A' doc	current defining the general state of the art which is not considered	principle or theory underlying the in-	AGRICIO						
1	be of particular relevance tier document published on or after the international filing date	"X" document of particular relevance; to considered novel or cannot be cousid	he claimed invention cannot be ered to involve an inventive step						
	manust which may throw doubte on priority claim(s) or which is	when the document is taken alone							
cit	od to establish the publication date of another citation or other scial reason (as specified)	"Y" document of particular relevance; to considered to involve an inventive	a atem when the discusses - I						
	cument referring to an oral disclosure, use, exhibition or other	combined with one or more other so being obvious to a person skilled in	CP GOCHERCOER MICE COMPARATION						
'P' do	name cusment published prior to the international filing date but later than .		1						
	actual completion of the international search	Date of mailing of the international se	earch report						
	20 MAY 1997 0 9 JUN 1997								
Name and	mailing address of the ISA/US mer of Patents and Trademarks	Authorized officer	カギイ						
Box PCT		CHRISTOPHER S. F. LOW	anovere						
Facsimile N	n, D.C. 20231 No. (703) 305-3230	Telephone No. (703) 308-0196	VU						
			. •						

INTERNATIONAL SEARCH REPORT

International application No.
PCT/US97/06103

!		
ntion). DOCUMENTS CONSIDERED TO BE RELEVANT		
Citation of document, with indication, where appropriate, of the releva	nt passages	Relevant to claim No
WO 95/05781 A1 (MEDTRONIC, INC.) 02 March 199 entire document.	95, see	1-25
WO 93/04724 A1 (MEDTRONIC, INC.) 18 March 199 entire document.	93, see	1-25
gap-junctional connexin40 and connexin43 correlate to f properties of components of the cardiac atrioventricular	unctional conduction	1-25
•		
·		
	Citation of document, with indication, where appropriate, of the releval WO 95/05781 A1 (MEDTRONIC, INC.) 02 March 199 entire document. WO 93/04724 A1 (MEDTRONIC, INC.) 18 March 199 entire document. GOURDIE et al. The spatial distribution and relative ab gap-junctional connexin40 and connexin43 correlate to for properties of components of the cardiac atrioventricular system. J. Cell Sci. 1993, Vol. 105, pages 985-991, see document.	Citation of document, with indication, where appropriate, of the relevant passages WO 95/05781 A1 (MEDTRONIC, INC.) 02 March 1995, see entire document. WO 93/04724 A1 (MEDTRONIC, INC.) 18 March 1993, see entire document. GOURDIE et al. The spatial distribution and relative abundance of gap-junctional connexin40 and connexin43 correlate to functional properties of components of the cardiac atrioventricular conduction system. J. Cell Sci. 1993, Vol. 105, pages 985-991, see entire document.

INTERNATIONAL SEARCH REPORT

International application No. PCT/US97/06103

B. FIELDS SEARCHED Electronic data bases consulted (Name of data base and where practicable terms used):									
Automated Patent System - US DIALOG - MEDLINE Search terms: catheter cardiac	SPAT, JPOABS, EPOABS stylet gap junction dna protein ex-	10 ex43 ex45 mapping							
			•						
		•							